

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 31, 2004
Secretary of State**

DOCUMENT# N51336

Entity Name: ARCOLA LAKE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

1076 NW 85 STREET
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

1076 NW 85 STREET
MIAMI, FL 33150

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FRANCIS, BERNADETTE
1076 NW 85 STREET
MIAMI, FL 33150 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PINDER, DUDLEY,
Address: 1145 NW 83 ST
City-St-Zip: MIAMI, FL 33150

Title: P () Delete
Name: FRANCIS, BERNADETTE
Address: 1076 NW 85 STREET
City-St-Zip: MIAMI, FL 33150

Title: D () Delete
Name: JOHNS, JOHN E REV.
Address: 1175 NW 83 STREET
City-St-Zip: MIAMI, FL 33150

Title: D () Delete
Name: ELLIGAN, IRVIN JR.
Address: 8431 NW 12 AVE
City-St-Zip: MIAMI, FL 33150

Title: VD () Delete
Name: JERKINS, MARIA,
Address: 1066 NW 85 ST
City-St-Zip: MIAMI, FL 33150

Title: S () Delete
Name: JOHNS, MRS J
Address: 1175 NW 83 ST
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DUDLEY PINDER

D

10/31/2004

Electronic Signature of Signing Officer or Director

Date