

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N93000003742

FILED
Oct 16, 2006
Secretary of State

Entity Name: SPRING AIRE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

503 NW 7TH AVE
CRYSTAL RIVER, FL 34428 US

New Principal Place of Business:

Current Mailing Address:

1720 NE 6TH AVE
OCALA, FL 34470 US

New Mailing Address:

1612 NE 6TH AVE
OCALA, FL 34470 US

FEI Number: 59-3228924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMMETT, JERRY R
1720 N.E. 6TH AVENUE
OCALA, FL 34470 US

Name and Address of New Registered Agent:

HAMMETT, JERRY R
1612 N.E. 6TH AVENUE
OCALA, FL 34470 US

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: JERRY HAMMETT

10/16/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COUNTS, GLENN
Address: 3021 NW 21ST ST
City-St-Zip: OCALA, FL 34475

Title: DP () Delete
Name: HAMMETT, JERRY R
Address: 1720 NE 6TH AVE
City-St-Zip: OCALA, FL 34470

Title: DS () Delete
Name: FOSTER, ELBERT L III
Address: 2336 SE 7TH ST
City-St-Zip: OCALA, FL 34479

Title: T () Delete
Name: BLAIR, WILLIAM
Address: 3850 NE 27TH CT
City-St-Zip: OCALA, FL

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
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 Chapter 119, 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: JERRY HAMMETT

RA

10/16/2006

Electronic Signature of Signing Officer or Director

Date