

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000000291

FILED  
Feb 14, 2011  
Secretary of State

**Entity Name:** SOUTHBRIDGE LANDING PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

PEGASUS PROPERTY MANAGEMENT, INC.  
17595 SOUTH TAMIAMI TRAIL STE 100  
FORT MYERS, FL 33908 US

**New Principal Place of Business:**

P & M PROPERTY MANAGEMENT, INC.  
14360 SOUTH TAMIAMI TRAIL STE B  
FORT MYERS, FL 33912 US

**Current Mailing Address:**

PEGASUS PROPERTY MANAGEMENT, INC.  
17595 SOUTH TAMIAMI TRAIL STE 100  
FORT MYERS, FL 33908 US

**New Mailing Address:**

P & M PROPERTY MANAGEMENT, INC.  
14360 SOUTH TAMIAMI TRAIL STE B  
FORT MYERS, FL 33912 US

**FEI Number:** 65-0493398

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALLEN, STEVEN  
PEGASUS PROPERTY MGMT  
17959 SOUTH TAMIAMI TRAIL STE 100  
FORT MYERS, FL 33908 US

**Name and Address of New Registered Agent:**

SAPP, PAUL L  
14360 SOUTH TAMIAMI TRAIL  
STE B  
FORT MYERS, FL 33912 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: PAUL L. SAPP

02/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BULSON, RON  
Address: 3471 BALLYBRIDGE CIRCLE #201  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S D  
Name: LARIVIERE, ALINE  
Address: 25041 BALLYBRIDGE CR #201  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP  
Name: DOERR, TOM  
Address: 3441 BALLYBRIDGE #102  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D  
Name: HAEMMERLE, BILL  
Address: 25080 BALLYCASTLE #101  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: P  
Name: O'KEEFE, MARILYN  
Address: 25050 BAILYCASTEL COURT #202  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: TD  
Name: GLUECK, NELSON  
Address: 3491 BALLYBRIDGE # 202  
City-St-Zip: BONITA SPRINGS, FL 34134

I hereby 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 all other like empowered.

SIGNATURE: PAUL L. SAPP

RA

02/14/2011

Electronic Signature of Signing Officer or Director

Date