## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N94000002103

FILED Oct 12, 2007 Secretary of State

Entity Name: OLD CUTLER GLEN HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

12396 SW 82 AVE 9000 SW 152 STREET MIAMI, FL 33156

SUITE 102 MIAMI, FL 33157

**Current Mailing Address:** New Mailing Address:

12396 SW 82 AVE 9000 SW 152 STREET MIAMI, FL 33156 SUITE 102

MIAMI, FL 33157

FEI Number: 65-0504264 FEI Number Applied For ( ) FEI Number Not Applicable ( ) 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: Name and Address of New Registered Agent:

SCOTT, FOSTER J SCOTT, FOSTER J 12396 SW 82 AVE 9000 SW 152 STREET MIAMI, FL 33156 US SUITE 102 MIAMI, FL 33157 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: FOSTER J. SCOTT 10/12/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

STEINGOLD, MARSHALL STEINGOLD, MARSHALL Name: Name: 7751 SW 185 STREET Address: 7751 SW 185 STREET Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33157

Title: VPD () Delete Title: () Change () Addition KLINE, JEFFREEY Name: Name:

Address: 7973 SW 187 STREET Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip:

Title: () Delete Title: PD (X) Change ( ) Addition

FANFANI, STEFANO Name: FANFANI, STEFANO Name: 7991 SW 186 ST 7991 SW 186 ST Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33157

Title: SD ( ) Delete Title: () Change () Addition

Name: MARDEN, MARILYN Name: Address: 18430 SW 78 PLACE Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MARSHALL STEINGOLD TD 10/12/2007