2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000001388

FILED Oct 05, 2009 Secretary of State

Entity Name: OAK GROVE CIRCLE HOMEOWNERS ASSOCIATION, INC.

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

PO BOX 677765 2212 ROSE BROOK COURT ORLANDO, FL 328677765 ORLANDO, FL 32817

Current Mailing Address: New Mailing Address:

PO BOX 677765 PO BOX 678275

ORLANDO, FL 328677765 ORLANDO, FL 328678275 US

FEI Number: 59-3304230 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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:

GRAJALES, NESTOR L 2212 ROSE BROOK CT. ORLANDO, FL 32817 U

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: NESTOR LUIS GRAJALES

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Delete Title: DP (X) Change () Addition GRAJALES, NESTOR Name: GRAJALES, NESTOR L MR 2212 ROSE BROOK CT Address: 2212 ROSE BROOK CT

 City-St-Zip:
 ORLANDO, FL 32817
 City-St-Zip:
 ORLANDO, FL 32817

 Title:
 DVP
 () Delete
 Title:
 DVP
 () Addition

 Name:
 LIMBER, MATTHEW T
 Name:
 GRAJALES, NESTOR L

 Address:
 11008 RIVERGROVE DR
 Address:
 2212 ROSE BROOK CT

 City-St-Zip:
 ORLANDO, FL 32812
 City-St-Zip:
 ORLANDO, FL 32817 US

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

 Name:
 DIAZ, CARMEN R
 Name:
 DIAZ, CARMEN R

 Address:
 11228 RIVER GROVE DR
 Address:
 11228 RIVER GROVE DR

 City-St-Zip:
 ORLANDO, FL 32817
 City-St-Zip:
 ORLANDO, FL 32817 US

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

 Name:
 COELHO, KEITH
 Name:
 DIAZ, CARMEN R

 Address:
 11126 RIVER GROVE DR.
 Address:
 11228 RIVER GROVE DR.

 City-St-Zip:
 ORLANDO, FL 32817
 City-St-Zip:
 ORLANDO, FL 32817 US

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: NESTOR LUIS GRAJALES DP 10/05/2009