2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 20, 2005
Secretary of State

DOCUMENT# N95000005062

Entity Name: ROOSEVELT ESTATE ASSOCIATION, INC.

Current Principal Place of Business:

1472 N MANGONIA DR
W. PALM BCH., FL 33401 US

New Principal Place of Business:

Current Mailing Address:

1472 N. MANGONIA DR.
W. PALM BCH., FL 33401

New Mailing Address:

FEI Number: 65-0780097 **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:

BETHEL, OLIVIA
1472 N. NORTH MANGONIA DRIVE
WEST PALM BEACH, FL 33401 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: OLIVIA BETHEL
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	BETHEL, OLIVIA 2	
Address:	1472 N. MANGONIA DRIVE	
City-St-Zip:	WEST PALM BEACH, FL 33401 US	
Title:	S	( ) Delete
Name:	SMITH, GLORIA G	
Address:	1506 NORTH MANGONIA CIRCLE	
City-St-Zip:	WEST PALM BEACH, FL 33401 US	
Title:	S	( ) Delete
Name:	WILSON, GLORIA	
Address:	1301 NORTH MANGONIA DR.	
City-St-Zip:	WEST PALM BEACH, FL 33401 US	
Title:	T	( ) Delete
Name:	JOHNSON, KATHLYNE	
Address:	1487 N. MANGONIA DRIVE	
City-St-Zip:	WEST PALM BEACH, FL 33401 US	
Title:	D	( ) Delete
Name:	KEMP, MARIA A	
Address:	1342 13TH STREET	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	D	( ) Delete
Name:	HARRIS, VICKIE	
Address:	1510 NORTH MANGONIA CIRCLE	
City-St-Zip:	WEST PALM BEACH, 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:	
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: OLIVIA BETHEL P 09/20/2005
Electronic Signature of Signing Officer or Director — Date