2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Jun 21, 2005
Secretary of State

DOCUMENT# N96000003867

Entity Name: THE HEART AND VASCULAR PAVILION CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1240 S. FORT HARRISON AVENUE
CLEARWATER, FL 34616

New Principal Place of Business:

1240 S. FORT HARRISON AVENUE
CLEARWATER, FL 33756

Current Mailing Address:

1240 S. FORT HARRISON AVENUE
CLEARWATER, FL 34616

New Mailing Address:

C/O PERSHING, YOAKLEY & ASSOCIATES
2963 GULF TO BAY BLVD., STE. 267
CLEARWATER, FL 33759

FEI Number: 59-3518640 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLINE, HARRY S
625 COURT ST
2ND FL
CLEARWATER, FL 33756 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: HARRY S. CLINE

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ZIECHECK, HAL
Address: 1240 S. FORT HARRISON AVENUE
City-St-Zip: CLEARWATER, FL 33756

Title: VD ( ) Delete
Name: MURBACH, RICHARD MD
Address: 1240 S. FORT HARRISON AVENUE
City-St-Zip: CLEARWATER, FL 33756

Title: STD ( ) Delete
Name: SIMMONS, FREDERIC JR
Address: 1240 S. FORT HARRISON AVENUE
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: SIMMONS, FREDERIC JR
Address: 1240 S. FORT HARRISON AVENUE
City-St-Zip: CLEARWATER, FL 33756

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: HAL ZIECHECK PD 06/21/2005

Electronic Signature of Signing Officer or Director — Date