

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000003551

FILED
Nov 04, 2010
Secretary of State

Entity Name: NATURE'S HIDEAWAY HOMEOWNERS ASSOCIATION INC.

Current Principal Place of Business:

2595 NATURES WAY
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

Current Mailing Address:

2595 NATURES WAY
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

FEI Number: 65-0822444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYES, TOMMY
2595 NATURES WAY
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

FALCONE, PETER J
2595 NATURES WAY
PALM BEACH GARDENS, FL 33410 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: PETER J FALCONE

11/04/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: GILBERT, IRWIN
Address: 2590 NATURES WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VD
Name: HABIB, GEORGE
Address: 2580 NATURES WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: SD
Name: KAPLAN, LISA
Address: 2630 NATURES WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TD
Name: FALCONE, PETER J
Address: 2595 NATURES WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D
Name: MILLER, JEN
Address: 2570 NATURES WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: PETER J FALCONE

TD

11/04/2010

Electronic Signature of Signing Officer or Director

Date