2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000002999

FILED Dec 07, 2004 Secretary of State

Entity Name: STERLING POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3750 STERLING PT RD 3756 STERLING PT RD GULF BREEZE, FL 32563 GULF BREEZE, FL 32563 **Current Mailing Address: New Mailing Address:** 3756 STERLING PT RD 3750 STERLING PT RD GULF BREEZE, FL 32563 GULF BREEZE, FL 32563 FEI Number: 43-4547068 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: HAWTHORNE, TERESA A BURKE, MARK A 3750 STERLING PT RD 3756 STERLING PT RD GULF BREEZE, FL 32563 US GULF BREEZE, FL 32563 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: MARK A BURKE 12/07/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PRESTIDGE, ANNA Name: Name: 1330 STERLING POINT PLACE Address: Address: City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: Title: Title: (X) Change () Addition () Delete HAWTHORNE, TERESA Name: BURKE, MARK A Name: Address: 3750 STERLING PT RD Address: 3756 STERLING PT RD City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: GULF BREEZE, FL 32563 Title: VPD () Delete Title: () Change () Addition ALEXANDER, DEBRA Name: Name: 1349 STERLING POINT PLACE Address: Address: City-St-Zip: GULF BREEZE, FL 32561 City-St-Zip: () Delete Title: Title: () Change () Addition HUNT, LINDA Name: Name: 1344 STERLING POINT PLACE Address: Address: City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: Title: Title: () Delete () Change () Addition DEASON, CHARLES Name: Name: 1320 STERLING POINT PLACE Address: Address: City-St-Zip: GULF BREEZE, FL 32561 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: MARK A BURKE PRES 12/07/2004