

# **2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N98000003340

**FILED**  
**Oct 01, 2010**  
**Secretary of State**

**Entity Name:** WILDER RESERVE SUBDIVISION ASSOCIATION, INC.

**Current Principal Place of Business:**

2714 WILDER RESERVE  
PLANT CITY, FL 33566

**New Principal Place of Business:**

**Current Mailing Address:**

2714 WILDER RESERVE  
PLANT CITY, FL 33566

**New Mailing Address:**

**FEI Number:** 59-3667798

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VIJIL, ROBERT  
2714 WILDER RESERVE DR  
PLANT CITY, FL 33566 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: ROBERT VIJIL

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ROBINSON, CAROL  
Address: 2727 WILDER RESERVE DRIVE  
City-St-Zip: PLANT CITY, FL 33566

Title: TREA  
Name: VIJIL, ROBERT  
Address: 2714 WILDER RESERVE DRIVE  
City-St-Zip: PLANT CITY, FL 33566

Title: VPD  
Name: KEEL, RYAN  
Address: 2709 WILDER RESERVE DR  
City-St-Zip: PLANT CITY, FL 33566

Title: SEC  
Name: BRUGUERA, KATHLEEN  
Address: 2722 WILDER RESERVE DRIVE  
City-St-Zip: PLANT CITY, FL 33566

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: ROBERT VIJIL

TREA

10/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date