

# 2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000004703

FILED  
Oct 26, 2010  
Secretary of State

**Entity Name:** ISTOKPOGA LAKE ASSOCIATION, INC.

**Current Principal Place of Business:**

225 WILD DUCK PT.  
LORIDA, FL 33857

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. 205  
LORIDA, FL 33857

**New Mailing Address:**

**FEI Number:** 65-0839860

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GALLOWAY, ROBERT  
225 WILD DUCK PT  
LORIDA, FL 33857 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 GALLOWAY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S  
Name: YERLY GREENE, VIRGINIA  
Address: 1620 HERON DR S  
City-St-Zip: LORIDA, FL 33857

Title: VP  
Name: ALBIN, GARY  
Address: 4232 TRAILS END  
City-St-Zip: LORIDA, FL 33857

Title: T  
Name: PORTER, JEANNETTE  
Address: 3000 COUNTRY LAKE DR  
City-St-Zip: SEBRING, FL 33876

Title: D  
Name: STEBBINS, KEN  
Address: 3219 WHITE OAK RD  
City-St-Zip: SEBRING, FL 33876

Title: D  
Name: CHASTEEN, JERRY  
Address: 101 WILD DUCK POINT  
City-St-Zip: LORIDA, FL 33857

Title: P  
Name: GALLOWAY, BERT  
Address: 225 WILD DUCK POINT  
City-St-Zip: LORIDA, FL 33857

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 GALLOWAY

P

10/26/2010

Electronic Signature of Signing Officer or Director

Date