2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000005003

FILED Jun 04, 2012 Secretary of State

Entity Name: CAPE HAZE MARINA VILLAGE, PHASE I, SECTION 1, HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6900 PLACIDA ROAD

8280 HARBORSIDE CIRCLE
ENGLEWOOD, FL 34224

ENGLEWOOD, FL 34224

Current Mailing Address: New Mailing Address:

6900 PLACIDA ROAD 8280 HARBORSIDE CIRCLE ENGLEWOOD, FL 34224 ENGLEWOOD, FL 34224

FEI Number: 65-0911313 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LOBECK, DANIEL J ROYSTON, ROBERT D JR.
2033 MAIN STREET 12670 NEW BRITTANY BOULEVARD
403 SUITE 101
SARASOTA, FL 34237 US FORT MYERS, FL 33907 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: ROBERT D. ROYSTON, JR. 06/04/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: PD

Name: DEAN, TONY

Address: 8280 HARBORSIDE CIRCLE City-St-Zip: ENGLEWOOD, FL 34224

Title: DT

Name: HARVEY, ALAN

Address: 8280 HARBORSIDE CIRCLE City-St-Zip: ENGLEWOOD, FL 34224

Title:

Name: ASCHE, TODD

Address: 8280 HARBORSIDE CIRCLE City-St-Zip: ENGLEWOOD, FL 34224

Title:

Name: LIBRIZZI, TED

Address: 8280 HARBORSIDE CIRCLE City-St-Zip: ENGLEWOOD, FL 34224

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: TONY DEAN DP 06/04/2012