2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 20, 2004
Secretary of State

DOCUMENT# N99000000519

Entity Name: LAKE IRMA COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

1065 MAITLAND CENTER COMMONS BLVD.
ORLANDO, FL 32751

New Principal Place of Business:

219 E. LIVINGSTON STREET.
ORLANDO, FL 32801

Current Mailing Address:

1065 MAITLAND CENTER COMMONS BLVD.
ORLANDO, FL 32751

New Mailing Address:

P.O. BOX 3151.
ORLANDO, FL 32802

FEI Number: 59-3757601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CANNON, KEVIN S
1065 MAITLAND CENTER COMMONS BLVD.
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

CANNON, KEVIN S
219 E. LIVINGSTON STREET
ORLANDO, FL 32801 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: KEVIN S. CANNON 10/20/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete
Name: RHODEN, THOMAS G MR.
Address: 8642 VILLANOVA ST.
City-St-Zip: ORLANDO, FL 32817

Title: T/D ( ) Delete
Name: HOLT, MARGE
Address: 8502 ALVERON AVE.
City-St-Zip: ORLANDO, FL 32817

Title: S/D ( ) Delete
Name: CANNON, NANCY
Address: 3007 M. I. T. ST.
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: THOMAS G. RHODEN P/D 10/20/2004
Electronic Signature of Signing Officer or Director Date