## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N99000003064

FILED Oct 06, 2006 Secretary of State

Entity Name: THE WOODLANDS VILLAS AT RIVENDELL ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** ANNE HOPE LANE SARASOTA, FL 34240 **Current Mailing Address: New Mailing Address:** PO BOX 110156 NAPLES, FL 34108 FEI Number: 65-0937646 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: Name and Address of New Registered Agent: WHITE, WILLIAM D CAM 2310 DELLA DRIVE NAPLES, FL 34117 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: WILLIAM D. WHITE Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: MAS ( ) Delete () Change () Addition WHITE, WILLIAM D Name: Name: 2310 BELLA DR Address: Address: City-St-Zip: NAPLES, FL 34117 City-St-Zip: Title: DP () Delete Title: () Change () Addition Name: MCDANIEL, LEWIS Name: Address: 708 ANNI HOPE LANE Address: City-St-Zip: OSPREY, FL 34229 City-St-Zip: Title: DS () Delete Title: DT (X) Change ( ) Addition HOOD, NANCY Name: HOOD, NANCY Name: 715 CRANE PRAIRE WAY 715 CRANE PRAIRE WAY Address: Address: City-St-Zip: OSPREY, FL 34229 City-St-Zip: OSPREY, FL 34229 Title: DT ( ) Delete Title: DS (X) Change ( ) Addition CALALE, PAÙL Name: Name: TURNER, DELORES Address: PO BOX 1477 Address: 712 ANNA HOPE LANE City-St-Zip: OSPREY, FL 34229 City-St-Zip: OSPREY, FL 34229

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: WILLIAM D. WHITE MAS 10/06/2006