2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N99000004054

1. Entity Name
BOBCAT TRAIL HOMEOWNERS ASSOCIATION, INC.

FILED
05 MAY -9 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
2975 BOBCAT VILLIAGE CTR RD STE-100 NORTH PORT, FL 34287	2975 BOBCAT VILLIAGE CTR RD STE-100 NORTH PORT, FL 34287

REINSTATEMENT 012B2005 REIN-NPC CR2E099 (6/04) 04-05

2. Principal Place of Business	3. Mailing Address
23081 Harborview Road	P.O. Box 380758
Suite, Apt. #, etc. 2ND Floor	Suite, Apt. #, etc.
City & State Port Charlotte FL	City & State Murdock FL
Zip / Country 33980 US	Zip / Country 33938 US

4. FEI Number
59-3593925
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KNOWLES, TIMOTHY A
1205 MANTEE AVE. W.
BRADENTON, FL 34205

7. Name and Address of New Registered Agent

Name: Kristine Wishard
Street Address (P.O. Box Number is Not Acceptable): 23081 Harborview Rd.
2ND Floor
City: Port Charlotte FL Zip Code: 33980

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Kristine Wishard 1/31/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $297.50

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TOKARZ, CHARLES 7419 39TH CT. E. SARASOTA, FL 34243	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MORSE, CAROLYN A 7419 39TH CT. E. SARASOTA, FL 34243	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 500054679445 05/17/05--01055--010 **297.50
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BORMAN, MAMIE S 7419 39TH CT. E. SARASOTA, FL 34243	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Lange, Gerry 23081 Harborview Road Port Charlotte, FL 33980 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	5/25/13 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gerald Lange 4/20/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #