

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000017995

Entity Name: SUMMIT VACATION REALTY, INC.

FILED
Nov 28, 2007
Secretary of State

Current Principal Place of Business:

8114 S. IBIZA CT.
ORLANDO, FL 32836 US

New Principal Place of Business:

911 LOXAHATCHEE DR.
JUPITER, FL 33458 US

Current Mailing Address:

8114 S. IBIZA CT.
ORLANDO, FL 32836 US

New Mailing Address:

911 LOXAHATCHEE DR.
JUPITER, FL 33458 US

FEI Number: 84-1481090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAKLEE, DAVID
8114 S. IBIZA CT.
ORLANDO, FL 32836 US

Name and Address of New Registered Agent:

SHAKLEE, DAVID
911 LOXAHATCHEE DR.
JUPITER, FL 33458 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: DAVID SHAKLEE

11/28/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHAKLEE, DAVID
Address: 8114 S. IBIZA CT.
City-St-Zip: ORLANDO, FL 32836 US

Title: VP () Delete
Name: BROWN-SHAKLEE, CYNTHIA
Address: 8114 S. IBIZA CT.
City-St-Zip: ORLANDO, FL 32836 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHAKLEE, DAVID
Address: 911 LOXAHATCHEE DR.
City-St-Zip: JUPITER, FL 33458 US

Title: VP (X) Change () Addition
Name: BROWN-SHAKLEE, CYNTHIA
Address: 911 LOXAHATCHEE DR.
City-St-Zip: JUPITER, FL 33458 US

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID SHAKLEE

PRES

11/28/2007

Electronic Signature of Signing Officer or Director

Date