2015 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 10, 2015
Secretary of State
CR9867406503

DOCUMENT# N08023

Entity Name: ISLAND VISTA ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3000 NORTH TAMIAMI TRAIL
N. FT. MYERS, FL 33903

Current Mailing Address:

566 LEOPARD LN
N. FT. MYERS, FL 33917 US

FEI Number: 65-0036386

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, KIMBERLY
566 LEOPARD LANE
N. FT. MYERS, FL 33917 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: KIMBERLY BROWN 10/10/2015

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	HUGHES, NADENE
Address	272 SABLE DR.
City-State-Zip:	N FORT MYERS FL 33917

Title	VP
Name	SHELQUIST, JOANN
Address	42 ELAND DR
City-State-Zip:	N. FT. MYERS FL 33917

Title	SEC
Name	BROWN, KIM
Address	566 LEOPARD LN
City-State-Zip:	N FORT MYERS FL 33917

Title	TREASURER
Name	JOHNSON, ANN
Address	201 ELAND DR
City-State-Zip:	N. FT. MYERS FL 33917

Title	DIR
Name	RYAN, WILLIAM R
Address	105 LEOPARD LN
City-State-Zip:	N. FT. MYERS FL 33917

Title	DIRECTOR
Name	HORNBECK, MICHAEL
Address	137 GIRAFFE DR
City-State-Zip:	NO FORT MYERS FL 33917

Title	DIRECTOR
Name	BAILEY, JOHN
Address	231 GAZELLE DR
City-State-Zip:	NORTH FORT MYERS FL 33917

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: ANN M JOHNSON TREASURER 10/10/2015

Electronic Signature of Signing Officer/Director Detail — Date