2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 704466

FILED Nov 12, 2008 Secretary of State

Entity Name: LARGO SOUND PARK CLUB INC

Current Principal Place of Business: New Principal Place of Business:

52 SHORELAND DRIVE KEY LARGO, FL 33037

Current Mailing Address: New Mailing Address:

P.O. BOX 3244 KEY LARGO, FL 33037

FEI Number: 59-2004839 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:

LOCKE, LOWELL

51 SE MARLIN AVE

20 BONEFISH AVE

KEY LARGO, FL 33037 US KEY LARGO, FL 33037 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: GARY MOSLEY 11/12/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 TILNEY, ROBERT F
 Name:
 MOSLEY, GARY A

 Address:
 65 SNAPPER AVE
 Address:
 20 BONEFISH AVE

 City-St-Zip:
 KEY LARGO, FL 33037
 City-St-Zip:
 KEY LARGO, FL 33037

Title: PDC () Delete Title: PDC (X) Change () Addition Name: LOCKE, LOWELL Name: BLOODWORTH, ROSS

 Address:
 51 SE MARLIN AVE
 Address:
 3 SNAPPER AVE

 City-St-Zip:
 KEY LARGO, FL 33037
 City-St-Zip:
 KEY LARGO, FL 33037

Title: VD () Delete Title: () Change () Addition

 Name:
 STRACENER, TERRIE
 Name:

 Address:
 61 SNAPPER AVE
 Address:

 City-St-Zip:
 KEY LARGO, FL 33037
 City-St-Zip:

 $\label{eq:title:sde} {\sf Title:} \qquad {\sf SD} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SD} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 HERDOCK, CAROL
 Name:
 WATERS, HEIDI

 Address:
 29 JEWFISH AVE
 Address:
 14 SNAPPER AVE

 City-St-Zip:
 KEY LARGO, FL 33037
 City-St-Zip:
 KEY LARGO, FL 33037

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY A MOSLEY TD 11/12/2008