

**2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 29, 2008  
Secretary of State**

DOCUMENT# 747684

Entity Name: DOLPHIN POINT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

205 DOLPHIN POINT  
SUITE #4  
CLEARWATER BEACH, FL 33767 US

**New Principal Place of Business:**

**Current Mailing Address:**

205 DOLPHIN POINT  
SUITE #3  
CLEARWATER BEACH, FL 33767 US

**New Mailing Address:**

FEI Number: 59-1968746      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:**

DOCOBO, ALBERT  
205 DOLPHIN POINT  
SUITE #3  
CLEARWATER BEACH, FL 33767 US

**Name and Address of New Registered Agent:**

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: ALBERT N DOCOBO

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ALBERT, DOCOBO  
Address: 5425 W CRENSHAW ST  
City-St-Zip: TAMPA, FL 33634 US

Title: VPD ( ) Delete  
Name: LINDA, GREEN  
Address: 205 DOLPHIN POINT #4  
City-St-Zip: CLEARWATER BEACH, FL 33767 US

Title: STTR ( ) Delete  
Name: JOHNSON, ROBERT  
Address: 205 DOLPHIN POINT #6  
City-St-Zip: CLEARWATER BEACH, FL 33767

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALBERT N DOCOBO

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

10/29/2008

\_\_\_\_\_  
Date