

# 2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 770863

FILED  
Dec 17, 2004  
Secretary of State

**Entity Name:** THE MOORINGS OF PERDIDO KEY II, INC.

**Current Principal Place of Business:**

C/O JOHN WELCH  
703 S PALAFOX ST  
PENSACOLA, FL 32501

**New Principal Place of Business:**

C/O JOHN WELCH  
1017 NORTH 12TH AVENUE  
PENSACOLA, FL 32501

**Current Mailing Address:**

C/O JOHN WELCH  
703 S PALAFOX ST  
PENSACOLA, FL 32501

**New Mailing Address:**

C/O JOHN WELCH  
1017 NORTH 12TH AVENUE  
PENSACOLA, FL 32501

**FEI Number:** 58-1777098      **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:**

WELCH, JOHN P.  
703 SOUTH PALAFOX STREET  
PENSACOLA, FL 32501    US

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

WELCH, JOHN P REG. AG  
1017 NORTH 12TH AVENUE  
PENSACOLA, FL 32501    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: JOHN P WELCH

12/17/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: MANISCALCO, GWEN  
Address: 4608 ALEXANDER DR  
City-St-Zip: METAIRIE, LA 70003

Title: VD      ( ) Delete  
Name: KLEIN, KEN  
Address: 6117 FLOWER DR  
City-St-Zip: METAIRIE, LA 70003

Title: STD      ( ) Delete  
Name: PEASE, HERB,  
Address: 4717 FLETCHER DR  
City-St-Zip: FORT WORTH, TX

Title: D      ( ) Delete  
Name: GORDON, JOHN  
Address: 4516 SHERIDAN AVE  
City-St-Zip: METAIRIE, LA 70002

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GWEN H. MANISCALCO

P

12/17/2004

Electronic Signature of Signing Officer or Director

Date