

**2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 18, 2006  
Secretary of State**

DOCUMENT# N05000010844

**Entity Name:** COURTHOUSE BUSINESS CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

302 SOUTHARD ST.  
KEY WEST, FL 33040

**New Principal Place of Business:**

1010 KENNEDY DRIVE  
SUITE 305  
KEY WEST, FL 33040

**Current Mailing Address:**

302 SOUTHARD ST.  
KEY WEST, FL 33040

**New Mailing Address:**

**FEI Number:** 20-4635223      **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:**

ALLISON, JOHN R III  
6803 OVERSEAS HWY  
MARATHON, FL 33050      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: JOHN ALLISON

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPT      ( ) Delete  
Name: WALKER, DOUGLAS G  
Address: 63 TWO TURTLES LN.  
City-St-Zip: SHARK KEY, FL 33040

Title: DVS      ( ) Delete  
Name: WALKER, LINDA A  
Address: 63 TWO TURTLES LN.  
City-St-Zip: SHARK KEY, FL 33040

Title: D      ( ) Delete  
Name: WALKER, EDITH S  
Address: 63 TWO TURTLES LN.  
City-St-Zip: SHARK KEY, FL 33040

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

Title: D      (X) Change ( ) Addition  
Name: MCFADYEN, VICTORIA  
Address: 300 SOUTHARD  
City-St-Zip: KEY WEST, FL 33040

Title: P      (X) Change ( ) Addition  
Name: WALKER, LINDA A  
Address: 63 TWO TURTLES LN.  
City-St-Zip: SHARK KEY, FL 33040

Title: D      (X) Change ( ) Addition  
Name: HEADRICK, KAREN  
Address: 1010 KENNEDY DRIVE  
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN HEADRICK

D

10/18/2006

Electronic Signature of Signing Officer or Director

Date