

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000007367

**FILED**  
**Nov 03, 2008**  
**Secretary of State**

**Entity Name:** VERO BEACH RESORT PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

979 BEACHLAND BLVD.  
VERO BCH, FL

**New Principal Place of Business:**

**Current Mailing Address:**

979 BEACHLAND BLVD.  
VERO BCH, FL

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **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:**

MARINE, CHRISTOPHER H  
979 BEACHLAND BLVD.  
VERO BCH, FL                      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: CHRISTOPHER H. MARINE

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title:                      PSTD                      ( ) Delete  
Name:                      PATEL, ANAND  
Address:                      1503 BELVEDERE RD.  
City-St-Zip:                      W. PALM BCH, FL 33406

Title:                      D                      ( ) Delete  
Name:                      PATEL, ANISSA  
Address:                      1503 BELVEDERE RD.  
City-St-Zip:                      W. PALM BCH, FL 33406

Title:                      D                      ( ) Delete  
Name:                      PREMA, DHIRU  
Address:                      602 W. ROUTE 66  
City-St-Zip:                      FLAGSTAFF, AZ 86001

**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: ANAND D. PATEL

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

PSTD

11/03/2008

\_\_\_\_\_  
Date