2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 766581

FILED Dec 08, 2005 Secretary of State

Entity Name: 9TH STREET VILLAS CONDO ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

15009 N FLA. AVE. PMB 241

553 S. DUNCAN AVENUE

TAMPA, FL 33612

CLEARWATER, FL 33756

Current Mailing Address:

New Mailing Address:

15009 N FLA. AVE. PMB 241

553 S. DUNCAN AVENUE CLEARWATER, FL 33756

TAMPA, FL 33612

FEI Number: 59-2704334

FEI Number Not Applicable ()

Name:

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:

CONDOMINIUM ALLIANCE MNGT CORP

JULIA GALPIN REALTY, INC. 553 S. DUNCAN AVENÚE

13309 WINDING OAK CT

CLEARWATER, FL 33756 US

TAMPA, FL 33612 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: JULIA GALPIN

City-St-Zip:

Electronic Signature of Registered Agent

FEI Number Applied For ()

12/08/2005

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

OFFICERS AND DIRECTORS:

(X) Change () Addition MAYNARD, JANICE

() Delete MAYNARD, JANICE Name: Address:

922 OTTO VILLA PLACE Address: 5506 N. CHEROKEE AVE. TAMPA, FL 00000, 33612 TAMPA, FL 33604

Title: () Delete SAFFORE, ANTHONY Name: Address:

912 OTTO VILLA PLACE City-St-Zip: TAMPA, FL 33612

Title: () Delete LYNCH, CHARLES Name: 901 OTTO VILLA DR. Address: City-St-Zip: TAMPA, FL 33612

Title: () Delete Name: FLORES, VLADIMIR Address: 914 OTTO VILLA PLACE City-St-Zip: TAMPA, FL 33612

City-St-Zip:

Title: VP/D (X) Change () Addition Name: JONES, MARY

Address: 908 OTTO VILLA PLACE City-St-Zip: TAMPA, FL 33612

Title: T/D (X) Change () Addition

DOWNEY, GREG Name: 919 OTTO VILLA PLACE Address: City-St-Zip: TAMPA, FL 33612

(X) Change () Addition Title: SECD

Name: FLORES, ANA

Address: 914 OTTO VILLA PLACE City-St-Zip: TAMPA, FL 33612

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: MARY JONES **VP** 12/08/2005