

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06411

FILED
Nov 10, 2009
Secretary of State

Entity Name: DOLPHIN'S COVE ESTATE, INC.

Current Principal Place of Business:

103 DOLPHIN COVE
FREEPORT, FL 324393000 US

New Principal Place of Business:

163 DOLPHIN COVE
FREEPORT, FL 324393000 US

Current Mailing Address:

103 DOLPHIN COVE
FREEPORT, FL 32439 US

New Mailing Address:

163 DOLPHIN COVE
FREEPORT, FL 324393000 US

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:

HUDKINS, RAYMOND P
1126 E LARUA ST
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

HUDKINS, RAYMOND P TD
1126 E LARUA ST
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: RAYMOND P. HUDKINS

11/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: SHIELDS, RICHARD D
Address: 163 DOLPHIN COVE
City-St-Zip: FREEPORT, FL 32439

Title: TD () Delete
Name: HUDKINS, RAYMOND P
Address: 1126 E LA RUA ST
City-St-Zip: PENSACOLA, FL 32501

Title: PD () Delete
Name: ROBBINS, CHANDLER
Address: 232 WHITE STREET, UNIT 5
City-St-Zip: NICEVILLE, FL 32578

Title: VD () Delete
Name: BROWN, RICHARD
Address: 3906 OAK HILL ROAD
City-St-Zip: DOUGLASVILLE, GA 30135

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 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: RAYMOND P. HUDKINS

TD

11/10/2009

Electronic Signature of Signing Officer or Director

Date