

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 509888

FILED  
Sep 28, 2009  
Secretary of State

Entity Name: HISTORIC STILTSVILLE, INC.

## Current Principal Place of Business:

3250 MARY ST  
406  
COCONUT GROVE, FL 33133

## Current Mailing Address:

3250 MARY ST  
406  
COCONUT GROVE, FL 33133

## New Principal Place of Business:

2911 GRAND AVENUE  
2A  
COCONUT GROVE, FL 33133

## New Mailing Address:

2911 GRAND AVENUE  
2A  
COCONUT GROVE, FL 33133

FEI Number: 59-1689442

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BALDWIN, GAIL B  
3250 MARY ST  
406  
COCONUT GROVE, FL 33133 US

## Name and Address of New Registered Agent:

BALDWIN, GAIL B  
2911 GRAND AVENUE  
2A  
COCONUT GROVE, FL 33133 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: GAIL B. BALDWIN

09/28/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BALDWIN, GAIL B  
Address: 3250 MARY ST #406  
City-St-Zip: COCONUT GROVE, FL 33133

Title: D ( ) Delete  
Name: SESSIONS, PAT  
Address: 1754 S. BAYSHORE LANE  
City-St-Zip: COCONUT GROVE, FL 33133

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BALDWIN, GAIL B  
Address: 2911 GRAND AVENUE  
City-St-Zip: COCONUT GROVE, FL 33133

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GAIL B. BALDWIN

PD

09/28/2009

Electronic Signature of Signing Officer or Director

Date