

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 715475

FILED
Feb 17, 2010
Secretary of State

Entity Name: GALT MILE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

37250 GALT OCEAN DR. (606)
OFFICE
FORT LAUDERDALE, FL 33308 US

New Principal Place of Business:

3750 GALT OCEAN DR. #606
OFFICE
FORT LAUDERDALE, FL 33308 US

Current Mailing Address:

C/O LEAH GLICKFIELD
3750 GALT OCEAN DR. (606)
FT LAUDERDALE, FL 33308 US

New Mailing Address:

3415 GALT OCEAN DR.
#135
FORT LAUDERDALE, FL 33308

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:

GLICKFIELD, LEAH S
3750 GALT OCEAN DR (606)
FORT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

GLICKFIELD, LEAH S
3750 GALT OCEAN DR
APT 606
FORT LAUDERDALE, FL 33308 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: LEAH S GLICKFIELD

02/17/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: IERACI, PIO R
Address: 3800 GALT OCEAN DR. #609
City-St-Zip: FT LAUDERDALE, FL 33308

Title: VD
Name: BERKOWITZ, ERIC
Address: 3850 GALT OCEAN DRIVE #811
City-St-Zip: FT LAUDERDALE, FL 33308

Title: D
Name: NESBITT, FRED
Address: 3900 GALT OCEAN DRIVE #2115
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D
Name: OPPERT, DONNA
Address: 4020 GALT OCEAN DR #1611
City-St-Zip: FT LAUDERDALE, FL 33308

Title: SD
Name: MCBRIDE, FERN
Address: 3850 GALT OCEAN DR #1905
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: TD
Name: GLICKFIELD, LEAH
Address: 3750 GALT OCEAN DR. #606
City-St-Zip: FT LAUDERDALE, FL 33308

I hereby 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 all other like empowered.

SIGNATURE: PIO R IERACI

PD

02/17/2010

Electronic Signature of Signing Officer or Director

Date