2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#718918

FILED Oct 23, 2008 Secretary of State

Entity Name: MARLIN APARTMENTS CONDOMINIUM, INC. **Current Principal Place of Business: New Principal Place of Business:** 22 TULIP AVENUE APT. 311 COCOA BEACH, FL 32931 **Current Mailing Address: New Mailing Address:** 22 TULIP AVENUE APT. 311 COCOA BEACH, FL 32931 FEI Number: 59-1402146 FEI Number Applied For () FEI Number Not Applicable () 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 New Registered Agent: Name and Address of Current Registered Agent: DELANEY, YVONNE B PUCCI, JOAN F 22 TULIP AVENUE 22 TULIP AVENUE COCOA BEACH, FL 32931 US COCOA BEACH, FL 32931 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: F. JOAN PUCCI 10/23/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CHRISTENSEN, CHRIS Name: Name: 2650 W SENECA TPKE Address: Address: City-St-Zip: MARCELLUS, NY 13108 City-St-Zip: Title: Title: () Delete () Change () Addition Name: STORM, SHIRLEY Name: Address: 903 LEVITT PKWY Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: Title: () Delete Title: () Change () Addition DAVE MCNAMARA, Name: Name: 3018 CLEMWOOD DR Address: Address: City-St-Zip: ORLANDO, FL 32803 City-St-Zip: Title: () Delete Title: () Change () Addition JOHNSON, JOHN Name: Name: 1811 HACIENDA DR Address: Address: City-St-Zip: STEVENSVILLE, MI 49127 City-St-Zip: Title: () Delete Title: (X) Change () Addition ROGERS, PEARL ROGERS, PEARL Name: Name: 1904 TADCASTER RD 22 TULIP AVENUE #327 Address: Address: City-St-Zip: BALTIMORE, MD 21228 City-St-Zip: COCOA BEACH, FL 32931

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: DAVID MCNAMARA RENT 10/23/2008