2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

2007 OCT 17 AM 8:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 726310

1. Entity Name
TRADE WINDS OF POMPANO ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1009 N OCEAN BOULEVARD POMPANO BEACH, FL 33062 US	1009 N OCEAN BOULEVARD POMPANO BEACH, FL 33062 US

10102007 REIN-NP CR2E099 (1/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1562865 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FISHKIN, SEYMOUR 1009 N. OCEAN BLVD POMPANO BEACH, FL 33062	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

800110873858
10/17/07--01011--007 **122.50

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $61.25 **After January 1, 2008, Fee will be $122.50**	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P NUTTALL, JOHN 1009 N OCEAN BLVD. POMPANO BCH, FL 33062	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Rice, Joseph T 1009 N Ocean Blvd Pompano Beach FL 33062 ☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	 GAUGHRAN, MINNIE 1009 NO. OCEAN BLVD POMPANO BEACH, FL 33062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Winston Robot VP 1009 N. Ocean Blvd Pompano Beach ☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DUVALL, BRENDA 1009 N OCEAN BLVD POMPANO BEACH, FL 33062	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Minnie Gaughran 1009 N. Ocean Blvd Pompano Beach FL ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FISHKIN, SEYMOUR 1009 N OCEAN BLVD POMPANO BEACH, FL 33062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres Fishkin Seymour 1009 N. Ocean Blvd Pompano Beach FL 33062 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CRACCHIOLA, JOE 1009 N. OCEAN BLVD. POMPANO BEACH, FL 33062	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Hearn, Joan 1009 N. Ocean Blvd Pompano Beach FL 33062 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TARAKAN, DIANA 1009 NO. OCEAN BLVD POMPANO BEACH, FL 33062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Fatigate Ralph D 1009 N. Ocean Blvd Pompano Beach FL 33062 ☐ Change ☑ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Seymour Fishkin 10-1-2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

10118 ON