2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 14, 2009
Secretary of State

DOCUMENT# 728143

Entity Name: POMPANO ATLANTIS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1000 S. OCEAN BLVD.
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

1000 S. OCEAN BLVD.
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 59-1512074 **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 Current Registered Agent:

GOSSY, MIRYAM
1000 S OCEAN BLVD
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

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: MIRYAM GOSSY

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CARFORA, VINCENT
Address: 1000 S. OCEAN BLVD. (17-N)
City-St-Zip: POMPANO BEACH, FL 33062

Title: D ( ) Delete
Name: TOFFEL, MICHAEL
Address: 1000 S. OCEAN BLVD. (6-B)
City-St-Zip: POMPANO BEACH, FL 33062

Title: T ( ) Delete
Name: DUMAIS, RICK
Address: 1000 S OCEAN BLVD 8-K
City-St-Zip: POMPANO BEACH, FL 33062

Title: VP ( ) Delete
Name: ALVIREZ, RICK
Address: 1000 S. OCEAN BLVD. (8N)
City-St-Zip: POMPANO BEACH, FL 33062

Title: P ( ) Delete
Name: COMBS, RICHARD
Address: 1000 S. OCEAN BLVD. (17-0)
City-St-Zip: POMPANO BEACH, FL 33062

Title: S ( ) Delete
Name: RASA, AURELIA
Address: 1000 S. OCEAN BLVD (15-D)
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: NATALE, RALPH
Address: 1000 S. OCEAN BLVD. 14-C
City-St-Zip: POMPANO BEACH, FL 33062

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: TANNER, MARC
Address: 1000 S OCEAN BLVD 7-I
City-St-Zip: POMPANO BEACH, FL 33062

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: FREDERICK REEHLING SECR 10/14/2009

Electronic Signature of Signing Officer or Director — Date