
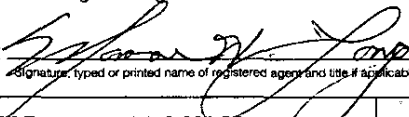
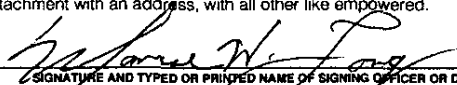


HURRICANE WILMA

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 NOV 22 PM 2:16

DOCUMENT # 740589					
1. Entity Name EL MAR CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 4228 EL MAR DRIVE #202 LAUDERDALE BY THE SEA, FL 33308			Mailing Address 4228 EL MAR DRIVE #202 LAUDERDALE BY THE SEA, FL 33308		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	10182005 REIN-NP CR2E099 (6/04) 4. FEI Number 59-1802579	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
YEZZI, THERESA 4228 EL MAR DR 202 LAUDERDALE-BY-THE-SEA, FL 33308				Name Long, Monroe Street Address (P.O. Box Number is Not Acceptable) 4228 El Mar Dr., #505 City Lauderdale By The Sea FL Zip Code 33308	
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.					
SIGNATURE 				11/17/05	
(NOTE: Registered Agent signature required when reinstating)				DATE	
FILE NOW!!! FEE IS \$61.25 After January 1, 2006, 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	VPD	<input type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LONG, MONROE		NAME		
STREET ADDRESS	4228 EL MAR DRIVE		STREET ADDRESS		
CITY-ST-ZIP	LAUDERDALE BY THE SEA, FL 33308		CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PONENTER, MARGARET		NAME	Damurjian, Arlene	
STREET ADDRESS	4228 EL MAR DRIVE		STREET ADDRESS	4228 El Mar Drive	
CITY-ST-ZIP	LAUDERDALE BY THE SEA, FL 33308		CITY-ST-ZIP	Lauderdale By The Sea, FL 33308	
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	YEZZI, THERESA		NAME	Downing, Jack	
STREET ADDRESS	4228 EL MAR DR 202		STREET ADDRESS	4228 El Mar Dr	
CITY-ST-ZIP	LAUD BY THE SEA, FL		CITY-ST-ZIP	Lauderdale-By-The-Sea, FL 33308	
TITLE		<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Fazi, John	
STREET ADDRESS			STREET ADDRESS	4228 El Mar Drive	
CITY-ST-ZIP			CITY-ST-ZIP	Lauderdale-By-The-Sea, FL 33308	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 				11/17/05	
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)				Date	
				Daytime Phone #	

11/22