2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 744576

FILED Oct 09, 2009 Secretary of State

Entity Name: OCEAN'S REACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:	
	IINO DEL MAR DRIVE FL 33957		
Current N	failing Address:	New Maili	ing Address:
	IINO DEL MAR DRIVE FL 33957		
n accordar	r: 59-1558742 FEI Number Applied For() FEI N nce with s. 607.193(2)(b), F.S., the corporation did not received Address of Current Registered Agent:	-	()
BOYLE, A 2230 CAM	NDREW J MINO DEL MAR DR FL., FL 33957 US	rume unu	. Address of New Registered Agent.
	e named entity submits this statement for the purpose se of Florida.	of changing i	its registered office or registered agent, or both,
SIGNATU	RE: J. ANDREW BOYLE		
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
itle: ame: ddress: ity-St-Zip:	D () Delete BOYLE, ANDREW J 2230 CAMINO DEL DRIVE SANIBEL, FL 33957	Title: Name: Address: City-St-Zip:	() Change () Addition
tle: ame: ddress: ity-St-Zip:	T () Delete PARKER, LOUISE 8030 FLAGSTAFF COMMERCE TOWNSHIP, MI 48382	Title: Name: Address: City-St-Zip:	() Change () Addition
itle: ame: ddress:	D () Delete WARREN, ALLISON 23 VAN HOLTON RD BASKING RIDGE, NJ 07920	Title: Name: Address: City-St-Zip:	() Change () Addition
	P () Delete	Title:	() Change () Addition
ity-St-Zip: tle: ame: ddress:	JUDITH JAASTAD 3225 TERRACE DR DES MOINES, IA 50312	Name: Address: City-St-Zip:	
ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip:	JUDITH JAASTAD 3225 TERRACE DR	Address:	()Change ()Addition

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: J. ANDREW BOYLE D 10/09/2009