

**2006 NOT-FOR-PROFIT CORPORATION
REINSTATEMENT**

192


FILED

2006 JUL -3 AM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 769932

1. Entity Name
POLYNESIAN VILLAGE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
16621 W HIGHWAY 98
PANAMA CITY BEACH, FL 32413

Mailing Address
6126 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 US

REINSTATEMENT 05-06 B 7/5/06



2. Principal Place of Business
3. Mailing Address
16621 Front Beach Rd.

Suite, Apt. #, etc.
Suite, Apt. #, etc.

06052006 REIN-NP CR2E099 (11/05)

City & State
Panama City Beach

4. FEI Number
59-2380787

Applied For
 Not Applicable

Zip Country
32413 USA

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
YOUNG, WILLIAM P
6126 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408

7. Name and Address of New Registered Agent
Name Daniel Akers
Street Address (P.O. Box Number is Not Acceptable)
16621 Front Beach Rd.

City Panama City Beach FL Zip Code 32413

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 *Daniel Akers* Daniel Akers, Board Vice President
100077160961
07/07/06--019537-016 **122.50
06/10/06
NOTE: Registered Agent signature required when reinstating. DATE

FILE NOW!!! FEE IS \$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		
TITLE	P	<input type="checkbox"/> Delete
NAME	WHITT, STEVE	
STREET ADDRESS	16621 FRONT BEACH ROAD, UNIT 126	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32413	
TITLE	V	<input type="checkbox"/> Delete
NAME	JOHNSON, LAWRENCE	
STREET ADDRESS	16621 FRONT BEACH ROAD, UNIT 113	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32413	
TITLE	S	<input type="checkbox"/> Delete
NAME	JOHNSON, LOIS	
STREET ADDRESS	16621 FRONT BEACH ROAD, UNIT 113	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32413	
TITLE	D	<input type="checkbox"/> Delete
NAME	SHELL, GAIL S	
STREET ADDRESS	16621 FRONT BEACH ROAD, UNIT 107	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32413	
TITLE	D	<input type="checkbox"/> Delete
NAME	CUMMINGS, LEON	
STREET ADDRESS	227 E WASHINGTON ST	
CITY-ST-ZIP	ABBEVILLE, AL 36310	
TITLE	D	<input type="checkbox"/> Delete
NAME	HALL, PATRICIA	
STREET ADDRESS	1712 MARBURY LANE	
CITY-ST-ZIP	ALBANY, GA 31707	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Joe Overton	
STREET ADDRESS	16621 Front Beach Rd. Unit 110	
CITY-ST-ZIP	Panama City Beach, FL 32413	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Daniel Akers	
STREET ADDRESS	16621 Front Beach Rd. Unit 221	
CITY-ST-ZIP	Panama City Beach, FL 32413	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lovie Barfield	
STREET ADDRESS	460 Harrison Ave.	
CITY-ST-ZIP	Panama City, FL 32401	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Charles Faircloth	
STREET ADDRESS	460 Harrison Ave.	
CITY-ST-ZIP	Panama City, FL 32401	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rodney Faircloth	
STREET ADDRESS	460 Harrison Ave.	
CITY-ST-ZIP	Panama City, FL 32401	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Michael Barfield	
STREET ADDRESS	460 Harrison Ave.	
CITY-ST-ZIP	Panama City, FL 32401	


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: *Daniel C. Akers* Daniel Akers, Board Vice President 6/24/06 205-477-5899
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

CONTINUATION SHEET

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2. Principal Place of Business		3. Mailing Address 16621 Front Beach Rd.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Panama City Beach		4. FEI Number 59-2380787	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 32413		Country USA		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
YOUNG, WILLIAM P 6126 THOMAS DRIVE PANAMA CITY BEACH, FL 32408			Name Daniel Akers		
			Street Address (P.O. Box Number is Not Acceptable) 16621 Front Beach Rd.		
			City Panama City Beach		FL
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 <i>Daniel Akers</i>		Daniel Akers, Board Vice President		06/10/06 DATE	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$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	P	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHITT, STEVE		NAME	Tom McPeak	
STREET ADDRESS	16621 FRONT BEACH ROAD, UNIT 126		STREET ADDRESS	460 Harrison Ave.	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32413		CITY-ST-ZIP	Panama City, FL 32401	
TITLE	V	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, LAWRENCE		NAME		
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CITY-ST-ZIP	PANAMA CITY BEACH, FL 32413		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CUMMINGS, LEON		NAME		
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CITY-ST-ZIP	ABBEVILLE, AL 36310		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALL, PATRICIA		NAME		
STREET ADDRESS	1712 MARBURY LANE		STREET ADDRESS		
CITY-ST-ZIP	ALBANY, GA 31707		CITY-ST-ZIP		
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: <i>Daniel E. Akers</i>		Daniel Akers, Board Vice President		06/24/06 205-477-5899	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	