

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L76912

FILED  
Apr 30, 2006  
Secretary of State

Entity Name: NOB HILL SAWGRASS CORP.

**Current Principal Place of Business:**

7395 PIONEER RD  
WEST PALM BEACH, FL 33413 US

**New Principal Place of Business:**

**Current Mailing Address:**

7395 PIONEER RD  
WEST PALM BEACH, FL 33413 US

**New Mailing Address:**

FEI Number: 65-0199422      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOEBIUS, HERBERT E  
7395 PIONEER RD  
WEST PALM BEACH, FL 33413 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: HERBERT E MOEBIUS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: MCCORD, ELIZABETH  
Address: 1612 ARROW WOOD RD.  
City-St-Zip: KNOXVILLE, TN

Title: P ( ) Delete  
Name: MOEBIUS, HERBERT  
Address: 7395 PIONEER RD  
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: T ( ) Delete  
Name: MOEBIUS, HERBERT E  
Address: 7395 PIONEER RD  
City-St-Zip: WEST PALM BEACH, FL 33413

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH MCCORD

Electronic Signature of Signing Officer or Director

SECR

04/30/2006

Date