## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N0000001545  1. Entity Name OLD PELICAN BAY III ASSOCIATION, INC.				FIL 2006 JUL -3 SECRETARY TALLAHASSE	PM 4: 04
Principal Place of Business  SIESTA DRIVE FORT MYERS BEACH, FL 33931  Mailing Address  SIESTA DRIVE FORT MYERS BEACH, FL			, FL 33931	IALLAHASSE	E. FLORIDA
Principal Place of Business		3. Mailing Address			
12205 Siesta Dr. Suite, Apt. #, etc.		12205 Siesta Dr. Suite, Apt. #, etc.		06122006 REIN.NP	0000000 44000 06 0h
		City & Chala		7,514,141	CR2E099 (11/05) 05 -0 b
Eity & State		City & State		4. FEI Number 59-3632108	Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New	v Registered Agent
_DEBOEST, II, RICHARD D			Name		<del> </del>
1415 HEN! FORT MY	DRY ST ERS, FL 33901		Street Addres	(P.O. Box Number is Not Acceptable)	
	<b>,</b>				
			City		FL Zip Code
	named entity submits this statement folions of registered agent.	or the purpose of changing	its registered office or regi	stered agent, or both, in the State of	Florida. I am familiar with, and accept
into oungue	or register of agent.				
SIGNATURE .		t and tile if applicable (M	OTE: Registered Agent signature re	equired when reinstating)	DATE
SIGNATURE .	Signature, typed or printed name of registered agent	t and tile it applicable (M	OTE: Registered Agent eignature n	equired when reinstating)	
		t and tile if applicable (N	OTE: Registered Agent eignature n		Make check payable to lorida Department of State
F11	Signature, typed or printed name of registered agent	RECTORS	11.		Make check payable to lorida Department of State CERS AND DIRECTORS IN 10
FII	Signature, typed or printed name of registered agent		11.	FI ADDITIONS/CHANGES TO OFFI	Make check payable to lorida Department of State
FII  10. HILE NAME STREET ADDRESS	Signature, typed or printed name of registered apere  LE NOWI!! FEE IS \$297.50  OFFICERS AND DI  T  ANDERSON, MICHAEL E  12215 SIESTA DR.	RECTORS Delate	11. TITLE SIRREH ADDRESS	ADDITIONS/CHANGES TO OFFI	Make check payable to lorida Department of State CERS AND DIRECTORS IN 10
FII  10. HILE NAME STREET ADDRESS CUY-ST-ZIP	Signature, typed or printed name of registered appearance.  LE NOWI!! FEE IS \$297.50  OFFICERS AND DI  T ANDERSON, MICHAEL E  12215 SIESTA DR. FORT MYERS BEACH, FL 339.	RECTORS Delate	11. TITLE  SIREET ADDRESS GITY-SI-ZIP	ADDITIONS/CHANGES TO OFFICE	Make check payable to lorida Department of State  CERS AND DIRECTORS IN 10  Change
FII  10. HILE NAME STREET ADDRESS	Signature, typed or printed name of registered apere  LE NOWI!! FEE IS \$297.50  OFFICERS AND DI  T  ANDERSON, MICHAEL E  12215 SIESTA DR.	RECTORS Delate	11.  TITLE  HAME  STREET ADDRESS  CITY-SI-ZIP  TITLE	ADDITIONS/CHANGES TO OFFICE	Make check payable to lorida Department of State  CERS AND DIRECTORS IN 10  Change
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FII  10. HILE NAME STREET ADDRESS CITY-ST-ZIP  ITTLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered appearance.  LE NOWI!! FEE IS \$297.50  OFFICERS AND DI  T ANDERSON, MICHAEL E 12215 SIESTA DR. FORT MYERS BEACH, FL 339. S ZIMO, BARTHOLOMEW D	Delete  31  Delete  Delete	11.  TITLE  FLAME  STREET ADDRESS  GITY-SI-ZIP  TITLE  NAME	ADDITIONS/CHANGES TO OFFICE	Make check payable to lorida Department of State  CERS AND DIRECTORS IN 10  Change Addition  Change Addition
FII  10.  HILE  NAME  STREET ADDRESS  CITY-ST-ZIP  HILE  NAME  STREET ADDRESS  CITY-ST-ZIP  HILE  NAME	Signature, typed or printed name of registered agent  LE NOW!!! FEE IS \$297.50  OFFICERS AND DI  T ANDERSON, MICHAEL E 12215 SIESTA DR. FORT MYERS BEACH, FL 339. S ZIMO, BARTHOLOMEW D 12217 SIESTA DR FORT MYERS BEACH, FL 339 P MILLER, STEPHEN	Delate  Delate  Delate	11.  TITLE  MANGE  STREET ADDRESS  GITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME	ADDITIONS/CHANGES TO OFFICE raig marquis ame address	Make check payable to lorida Department of State  CERS AND DIRECTORS IN 10  Change
FII  10. HILE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP HILE	Signature, typed or printed name of registered agent  LE NOW!!! FEE IS \$297.50  OFFICERS AND DI  T ANDERSON, MICHAEL E 12215 SIESTA DR. FORT MYERS BEACH, FL 339. S ZIMO, BARTHOLOMEW D 12217 SIESTA DR FORT MYERS BEACH, FL 339 P	Delete  31  Delete  Delete  Delete	11.  TITLE  MANGE  STREET ADDRESS  GITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE	ADDITIONS/CHANGES TO OFFE Traig marquis ame address 2:NO (Spelling	Make check payable to lorida Department of State  CERS AND DIRECTORS IN 10  Change Addition  Change Addition  Change Addition
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FII  10. HILE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent  LE NOW!!! FEE IS \$297.50  OFFICERS AND DI  T ANDERSON, MICHAEL E 12215 SIESTA DR. FORT MYERS BEACH, FL 339. S ZIMO, BARTHOLOMEW D 12217 SIESTA DR FORT MYERS BEACH, FL 339 P MILLER, STEPHEN 12205 SIESTA DR	Delete  31  Delete  Delete  31	11.  TITLE MAME. STREET ADDRESS GIY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	ADDITIONS/CHANGES TO OFFICE raig marquis ame address	Make check payable to lorida Department of State  CERS AND DIRECTORS IN 10  Change Addition  Change Addition  Change Addition  Change Addition
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FII  10.  HILE  NAME  STREET ADDRESS  CITY-ST-ZIP  HILE  NAME  STREET ADDRESS  CITY-ST-ZIP  HILE  NAME  STREET ADDRESS  CITY-ST-ZIP  THE  NAME  STREET ADDRESS  CITY-ST-ZIP  THE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered agent  LE NOW!!! FEE IS \$297.50  OFFICERS AND DI  T ANDERSON, MICHAEL E 12215 SIESTA DR. FORT MYERS BEACH, FL 339. S ZIMO, BARTHOLOMEW D 12217 SIESTA DR FORT MYERS BEACH, FL 339 P MILLER, STEPHEN 12205 SIESTA DR	Delote  31  Delote  31  Delote  31  Delote  31  Delote	11.  TITLE SIREET ADDRESS CITY-SI-ZIP  TITLE NAME SIREET ADDRESS CITY-SI-ZIP  TITLE NAME SIREET ADDRESS	ADDITIONS/CHANGES TO OFFE raig marquis ame address ZINO (Spelling 07/07/080105	Make check payable to torida Department of State  CERS AND DIRECTORS IN 10  Change Addition  Change Addition  Change Addition  Change Addition
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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.

Stephen miller

6/12/06 239-482-6575