## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N00000002201

FILED Dec 14, 2009 Secretary of State

Entity Nar	me: GRAYTON BEACH COTTAGES OW	NER'S ASSOCIATION, INC.		
Current P	rincipal Place of Business:	New Principal Place o	of Business:	
15 PINE S' SANTA RO	T. DSA BEACH, FL 32459			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
15 PINE S' SANTA RO	T. DSA BEACH, FL 32459			
	: 59-3695940 FEI Number Applied For ( ) ce with s. 607.193(2)(b), F.S., the corporation did	FEI Number Not Applicable() I not receive the prior notice.	Certificate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and Address of	New Registered Agent:	
SCHOEN, 15 PINE S' SANTA RO				
The above in the State	named entity submits this statement for the of Florida.	e purpose of changing its registered	office or registered agent, or both,	
SIGNATUF	RE: BROOKS SCHOEN			
	Electronic Signature of Registered A	Agent	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) Delete SCHOEN, BROOKS 945 RIVER OVERLOOK CT ATLANTA, GA 30328	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete FISH, DEMING 500 RIVER CREST CT ATLANTA, GA 30328	Title: Name: Address: City-St-Zip:	()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: BROOKS SCHOEN D 12/14/2009