

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N01000000929

**FILED**  
**Nov 15, 2004**  
**Secretary of State****Entity Name:** COCONUT GROVE SAILING FOUNDATION, INC.**Current Principal Place of Business:**2990 S BAYSHORE DR  
COCONUT GROVE, FL 33133**New Principal Place of Business:**420 SOUTH DIXIE HWY #2B  
CORAL GABLES, FL 33146**Current Mailing Address:**P.O. BOX 331835  
COCONUT GROVE, FL 33133**New Mailing Address:**420 SOUTH DIXIE HWY #2B  
CORAL GABLES, FL 33146**FEI Number:** 65-1073893      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**Name and Address of Current Registered Agent:**BRANNING, CHARLES  
6983 SW 53 LN  
MIAMI, FL 33155      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:****Title:** D      ( ) Delete  
**Name:** ABELL, CHARLES G  
**Address:** 12550 PINE NEEDLE LN  
**City-St-Zip:** MIAMI, FL 33156**Title:** D      ( ) Delete  
**Name:** BRANNING, CHARLES  
**Address:** 6983 SW 53 LN  
**City-St-Zip:** MIAMI, FL 33155**Title:** D      ( ) Delete  
**Name:** CARPENTER, L.B. III  
**Address:** 420 S DIXIE HWY, #2B  
**City-St-Zip:** CORAL GABLES, FL 33146**Title:** D      ( ) Delete  
**Name:** HERNANDEZ, BETH  
**Address:** 10464 SW 124 CT  
**City-St-Zip:** MIAMI, FL 33186**Title:** D      ( ) Delete  
**Name:** KILPATRICK, KATHERINE  
**Address:** 7930 SW 54 CT  
**City-St-Zip:** MIAMI, FL 33143**Title:** D      ( ) Delete  
**Name:** WEBER, MICHAEL J  
**Address:** 2411 SWANSON AVE  
**City-St-Zip:** COCONUT GROVE, FL 33133**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P      (X) Change ( ) Addition  
**Name:** ABELL, CHARLES G  
**Address:** 12550 PINE NEEDLE LN  
**City-St-Zip:** MIAMI, FL 33156**Title:** S      (X) Change ( ) Addition  
**Name:** BRANNING, CHARLES  
**Address:** 6983 SW 53 LN  
**City-St-Zip:** MIAMI, FL 33155**Title:**      ( ) Change ( ) Addition  
**Name:**      ( ) Change ( ) Addition  
**Address:**      ( ) Change ( ) Addition  
**City-St-Zip:**      ( ) Change ( ) Addition**Title:**      ( ) Change ( ) Addition  
**Name:**      ( ) Change ( ) Addition  
**Address:**      ( ) Change ( ) Addition  
**City-St-Zip:**      ( ) Change ( ) Addition**Title:**      ( ) Change ( ) Addition  
**Name:**      ( ) Change ( ) Addition  
**Address:**      ( ) Change ( ) Addition  
**City-St-Zip:**      ( ) Change ( ) Addition**Title:** T      (X) Change ( ) Addition  
**Name:** ANDREA, STRINGOS  
**Address:** 3616 ALHAMBRA CIR  
**City-St-Zip:** CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREA STRINGOS

T

11/15/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date