

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N01000003307 1. Entity Name BEL AIR BEACH OWNERS ASSOCIATION, INC.			
Principal Place of Business 5547 PEDRICK PLANTATION CIRCLE TALLAHASSEE, FL 32311		Mailing Address 5547 PEDRICK PLANTATION CIRCLE TALLAHASSEE, FL 32311	
2. Principal Place of Business 8511-8515 SURF DRIVE Suite, Apt. #, etc.		3. Mailing Address 2802 CANAL DRIVE Suite, Apt. #, etc.	
City & State PANAMA City Beach, FL		City & State PANAMA City, FL	
Zip 32408	Country U.S.A.	Zip 32405	Country U.S.A.
6. Name and Address of Current Registered Agent BURKE, M. TODD 221 MCKENZIE AVENUE PANAMA CITY, FL 32401		7. Name and Address of New Registered Agent Name Robert J. Siragusa Street Address (P.O. Box Number is Not Acceptable) 2802 CANAL DRIVE City PANAMA CITY FL Zip Code 32405	
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 <u><i>Robert J. Siragusa</i></u> Robert J. Siragusa <u>June 19, 2006</u> 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 NAME STREET ADDRESS CITY-ST-ZIP DP MONEY, MICHAEL W 5547 PEDRICK PLANTATION CIRCLE TALLAHASSEE, FL 32311	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP DP SANDRA YOUNG P.O. Box 220 VERNON, FL 32462	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP DST MONEY, TRACY 5547 PEDRICK PLANTATION CIRCLE TALLAHASSEE, FL 32311	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP DST ROBERT SIRAGUSA 2802 CANAL DRIVE PANAMA CITY, FL 32405	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D SMITH, STEVE 1414 W TENNESSEE ST TALLAHASSEE, FL 32301	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D CONNIE Smith P.O. Box 183 Alford, FL 32420	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 100076633041 06/27/06--01022--001 **131.25	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
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: <u><i>Robert J. Siragusa</i></u> Robert J. Siragusa <u>June 19, 2006</u> <u>850-763-8631</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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REINSTATEMENT
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