

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000004643

FILED  
Oct 19, 2008  
Secretary of State

**Entity Name:** CITIZENS TO PRESERVE MARCO ISLAND ZONING, INC.

**Current Principal Place of Business:**

2640 GOLDEN GATE PKWY., STE. 206  
NAPLES, FL 34105

**New Principal Place of Business:**

**Current Mailing Address:**

2640 GOLDEN GATE PKWY., STE. 206  
NAPLES, FL 34105

**New Mailing Address:**

FEI Number: 59-3724818      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:**

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

ROSS, DONALD K JR., ESQ  
2640 GOLDEN GATE PKWY., STE. 206  
NAPLES, FL 34105      US

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: DONALD ROSS

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: ROSS, DONALD K JR  
Address: 2640 GOLDEN GATE PKWY., STE. 206  
City-St-Zip: NAPLES, FL 34105

Title: D      ( ) Delete  
Name: SHNIPER, PAMELA  
Address: 1061 BOND CT.  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D      ( ) Delete  
Name: SHNIPER, SAMUEL  
Address: 1061 BOND COURT  
City-St-Zip: MARCO ISLAND, FL 34145

**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 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: PAMELA SHNIPER

D

10/19/2008

Electronic Signature of Signing Officer or Director

Date