2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000002419

FILED Oct 11, 2007 Secretary of State

Entity Name: APALACHEE BAY COMMUNITY SAILING INC.

Current Principal Place of Business:			New Principal Place of Business:	
	DE LAFITTE SSEE, FL 3231	2		
Current Mailing Address:			New Mailing Address:	
3272 RUE TALLAHA	DE LAFITTE SSEE, FL 3231	2		
FEI Number	: 06-0675956	FEI Number Applied For ()	FEI Number Not Applicable()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
3272 RUE TALLAHA: The above	I, PHILLIP A EDE LAFITTE SSEE, FL 3231 In named entity se of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
SIGNATU	RE: PHILLIPA	WERNDLI		
3,0,0,0		ic Signature of Registered Age	ent	Date
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR
Title:				
Name: Name: Address: City-St-Zip:	D () WERNDLI, PHIL 3272 RUE DE L TALLAHASSEE,	AFITTE	Title: Name: Address: City-St-Zip:	() Change () Addition
Name: Address: City-St-Zip: Fitle: Name: Address:	WERNDLI, PHIL 3272 RUE DE L TALLAHASSEE,	LLIP A AFITTE FL 32312 Delete EE ACRES	Name: Address:	() Change () Addition () Change () Addition
Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	WERNDLI, PHIL 3272 RUE DE L TALLAHASSEE, D () LIPSIUS, MARC 1896 WITCHTR TALLAHASSEE,	LLIP A AFITTE FL 32312 Delete EE ACRES FL 32312 Delete TEVE	Name: Address: City-St-Zip: Title: Name: Address:	
Name: Address:	WERNDLI, PHIL 3272 RUE DE L TALLAHASSEE, D () LIPSIUS, MARC 1896 WITCHTR TALLAHASSEE, D () AUGUSTINE, ST 1410 WEKEWA TALLAHASSEE,	LLIP A AFITTE FL 32312 Delete EE ACRES FL 32312 Delete TEVE NENE FL 32301 Delete N POINT DR	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	() 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: PHILLIP A. WERNDLI P 10/11/2007