

1072

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

04 DEC 13 PM 4:25


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04/28/04 90237 025 \$61.25



DOCUMENT # N02000008760

1. Entity Name
MARBELLA AT SPANISH WELLS HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**C/O BLUE MARTIN MANAGEMENT GROUP, LLC
8270 COLLEGE PARKWAY, SUITE 104
FORT MYERS, FL 33919**

Mailing Address
**C/O BLUE MARLIN MANAGEMENT GROUP, LLC
PO BOX 07310
FORT MYERS, FL 33919**

2. Principal Place of Business
Family Property Services Inc

3. Mailing Address
1330 Rail Head Blvd

Suite, Apt. #, etc.
Add. same as mailing

Suite, Apt. #, etc.
#4

City & State
Naples FL

Zip
34110

Country

11022004 REIN-NP CR2E099 (6/04)

4. FEI Number
APPLIED FOR 04-37554-18

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

KLEINDIENST, TODD
8270 COLLEGE PARKWAY, SUITE 104 C
FORT MYERS, FL 33919

7. Name and Address of New Registered Agent

Name **Richard Sherwood Jr**

Street Address (P.O. Box Number is Not Acceptable)
1330 Rail Head Blvd #4

City **Naples** FL Zip Code **34110**

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 **Richard C Sherwood Jr.** DATE **12/08/04**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$236.25
After January 1, 2005, Fee will be \$297.50

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COUGHLIN, JAY 28000 SPANISH WELLS BLVD BONITA SPRINGS, FL 34135	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KEY-BUXTON, WENDY 28000 SPANISH WELLS BLVD BONITA SPRINGS, FL 34135	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SAMPLES, MARCEL 28000 SPANISH WELLS BLVD BONITA SPRINGS, FL 34135	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Tony Sealona 28000 Spanish wells Blvd Bonita Springs FL 34135	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

REINSTATEMENT 04

200043433132
12/15/04--01051--018 **8.75

12. I hereby certify that the information supplied with this filing does not qualify 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 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 other attachment with address, with all other like empowered.

SIGNATURE: **Signature of the Signer** DATE _____ DAYTIME PHONE # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

2 of 2

Marbella at Spanish Wells Homeowners Association, Inc.
c/o Blue Marlin Management Group, LLC
P.O. Box 07310
Fort Myers, Florida 33919
(239) 433-4350 (Office) / (239) 433-3685 (Facsimile)

04 DEC 13 PM 4:25

SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

November 1, 2004

The Florida Department of State Attention: Examiners' Department
 Division of Corporations
 PO Box 6198
 Tallahassee, FL 32314-6198

To Whom It May Concern:

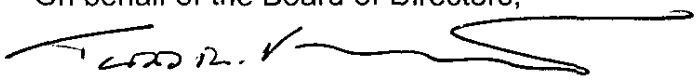
Marbella at Spanish Wells Homeowners Association, Inc., Document Number N02000008760 is in receipt of your communication informing said Association of the Notice of Dissolution or Revocation.

We are petitioning for reinstatement and have attached a completed Annual Report with FEI Number. Per my telephone conversation of October 27, 2004, with Tyrone Scott, he confirmed receipt of Annual Report and fees paid via check # 2000 in the amount of \$61.25. The single error in the timely filing was the omission of the FEI Number by the previous management company (The Management Connection, Inc.) The Management Connection Inc. did not forward to Blue Marlin Management Group, LLC (took over June 1st) the May 5, 2004 communication from your office identifying the omission error. Therefore, Blue Marlin Management Group did not receive the May 5th communication nor were we aware of your correspondence.

Based upon the above and appropriate, completed attachments, we are respectfully requesting reinstatement effective immediately.

If you have any additional needs or comments, please contact me at your opportunity.

On behalf of the Board of Directors,



Todd E. Kleindienst, CAM

Blue Marlin Management Group, LLC
 (239) 433-4350 (Office)
 (239) 433-3685 (Facsimile)
 (239) 289-5576 (Cell Phone)
todd@blue-marlin-mgt.com