2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Feb 20, 2007
Secretary of State

DOCUMENT# N03000007299

Entity Name: SAFE HARBOR SEAPORT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6810 FRONT STREET
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

6810 FRONT STREET
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 20-0176641 **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:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD, #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

WEITZEL, CHARLES L CPA
6810 FRONT STREET
KEY WEST, FL 33040 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: CHARLES WEITZEL CPA 02/20/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BERNSTEIN, ROGER
Address: 6810 FRONT STREET
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: GRIFFITHS, ANDY JR.
Address: 6810 FRONT STREET
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: CRUMBLEY, WALTER JR.
Address: 6810 FRONT STREET
City-St-Zip: KEY WEST, FL 33040

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 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: WALTER CRUMBLEY JR D 02/20/2007
Electronic Signature of Signing Officer or Director Date