

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000009863

FILED  
Oct 29, 2009  
Secretary of State

Entity Name: ASBURY PARK HOMEOWNERS ASSOCIATION, INC

**Current Principal Place of Business:**

2906 WEST GANDY BLVD  
UNITS 1-6  
TAMPA, FL 33611

**New Principal Place of Business:**

**Current Mailing Address:**

2906 WEST GANDY BLVD # 5  
TAMPA, FL 33611

**New Mailing Address:**

PO BOX 13577  
ST. PETERSBURG, FL 33733

FEI Number: 84-1715269      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:**

KEMERER, CRAIG  
2906 WEST GANDY BLVD  
SUITE 4  
TAMPA, FL 33611 US

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

SAYLOR, REBECCA  
2475 17TH AVE N  
ST. PETERSBURG, FL 33713 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: REBECCA SAYLOR

10/29/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: KEMERER, CRAIG  
Address: 2906 WEST GANDY BLVD SUITE 4  
City-St-Zip: TAMPA, FL 33611

Title: VT ( ) Delete  
Name: FABRIKANT, DAVID  
Address: 2906 WEST GANDY BLVD #1  
City-St-Zip: TAMPA, FL 33611

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PS (X) Change ( ) Addition  
Name: KEMERER, CRAIG  
Address: PO BOX 13577  
City-St-Zip: ST. PETERSBURG, FL 33733

Title: VT (X) Change ( ) Addition  
Name: FABRIKANT, DAVID  
Address: PO BOX 13577  
City-St-Zip: ST. PETERSBURG, FL 33733

Title: S ( ) Change (X) Addition  
Name: GONZALEZ, PATRICK  
Address: PO BOX 13577  
City-St-Zip: ST. PETERSBURG, FL 33733

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: REBECCA SAYLOR

LCAM

10/29/2009

Electronic Signature of Signing Officer or Director

Date