2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000002493

FILED Oct 07, 2006 Secretary of State

Entity Name: THREE PALMS CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1411 TRUMAN AVE KEY WEST, FL 33040 **Current Mailing Address: New Mailing Address:** 1411 TRUMAN AVE 1410 ALBURY STREET KEY WEST, FL 33040 KEY WEST, FL 33040 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COVAN, DIANE T 1901 FOGARTY AVE #1 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: DIANE COVAN Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DVS () Change () Addition () Delete BEK-GRAN, PETER Name: Name: 1410 ALBURY STREET Address: Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: Title: DP () Delete Title: () Change () Addition Name: DOOLEY, KENNETH Name: Address: 1410 ALBURY STREET Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: Title: () Delete Title: () Change () Addition MERCIER, MARYANN Name: Name: Address: 1410 ALBURY STREET Address: City-St-Zip: KEY WEST, FL 33040 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: KENNETH DOOLEY DP 10/07/2006