

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000004024

FILED
Oct 28, 2009
Secretary of State

Entity Name: TAYLOR COASTAL COMMUNITIES ASSOCIATION INC.

Current Principal Place of Business:

18820 KEATON BEACH ROAD
PERRY, FL 32348 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 91
PERRY, FL 32348 US

New Mailing Address:

FEI Number: 24-2649604 **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:

MALONE, GENNIE
21536 OSPREY ROAD
PERRY, FL 32348 US

Name and Address of New Registered Agent:

ROSS, JAMES
2229 RED OAK RD.
PERRY, FL 32348 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: JAMES ROSS

10/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: PATTI, CAUSEY
Address: 19060 GOOD TIMES DRIVE
City-St-Zip: PERRY, FL 32348 US

Title: VP () Delete
Name: SENTER, LYNETTE
Address: 19025 MEXICO ROAD
City-St-Zip: PERRY, FL 32348 US

Title: TREA () Delete
Name: MALONE, GENNIE
Address: 21536 OSPREY ROAD
City-St-Zip: PERRY, FL 32348 US

Title: SECT () Delete
Name: TAYLOR, CAROLYN
Address: 8622 BEACH ROAD
City-St-Zip: PERRY, FL 32348 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SECT (X) Change () Addition
Name: SENTER, LYNETTE
Address: 19025 MEXICO ROAD
City-St-Zip: PERRY, FL 32348 US

Title: TREA (X) Change () Addition
Name: ROSS, JAMES
Address: 2229 RED OAK RD.
City-St-Zip: PERRY, FL 32348 US

Title: VP (X) Change () Addition
Name: MEREDITH, DIANNE
Address: 20538 KEATON BEACH RD.
City-St-Zip: PERRY, FL 32348 US

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: JAMES ROSS

TREA

10/28/2009

Electronic Signature of Signing Officer or Director

Date