

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000006564

FILED
Oct 05, 2006
Secretary of State

Entity Name: LITTLE HARBOR AT PUNTA GORDA ISLES, INC.

Current Principal Place of Business:

1048 6TH AVENUE NORTH
NAPLES, FL 34102

New Principal Place of Business:

1084 6TH AVENUE NORTH
NAPLES, FL 34102

Current Mailing Address:

1048 6TH AVENUE NORTH
NAPLES, FL 34102

New Mailing Address:

1084 6TH AVENUE NORTH
NAPLES, FL 34102

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

Name and Address of New Registered Agent:

WOOD, DOUGLAS A
1000 TAMiami TRAIL NORTH SUITE 201
NAPLES, FL 34102 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: DOUGLAS A WOOD

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PADLO, LARRY
Address: 953- 18TH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: CABRAL, TIM
Address: 692 PINE COURT
City-St-Zip: NAPLES, FL 34102

Title: D (X) Delete
Name: DOERFLER, JENNIFER
Address: 79 EMERALD WOOD DRIVE
City-St-Zip: NAPLES, FL 34108

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: TIM CABRAL

D

10/05/2006

Electronic Signature of Signing Officer or Director

Date