## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N05000010508

FILED Dec 07, 2006 Secretary of State

Entity Name: KANA LUI MIAMI OUTRIGGER CANOE CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

3601 RICKENBACHER CAUSEWAY 12599 NW 107TH AVENUE

KEY BISCAYNE, FL 33149 MEDLEY, FL 33178

Current Mailing Address: New Mailing Address:

3601 RICKENBACHER CAUSEWAY 12599 NW 107TH AVENUE KEY BISCAYNE, FL 33149 MEDLEY, FL 33178

WEBEET, 12 33173

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:

WALDMAN, GLEN H ESQ
1401 BRICKELL AVE STE 700
MIAMI, FL 33131
US

WALDMAN, GLEN H ESQ
200 SOUTH BISCAYNE BLVD
SUITE # 2500

MIAMI, FL 33131 US SOTTE # 2500 MIAMI, FL 33131 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: GLEN H. WALDMAN, ESQ. 12/07/2006

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D ( ) Delete Title: D (X) Change ( ) Addition

Name: STREETER, TIM Name: STREETER, TIM

 Address:
 3601 RICKENBACHER CAUSEWAY
 Address:
 12599 NW 107TH AVENUE

 City-St-Zip:
 KEY BISCAYNE, FL 33149
 City-St-Zip:
 MEDLEY, FL 33178

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: BEANS, ROBERT Name: BEANS, ROBERT

Address: 3601 RICKENBACHER CAUSEWAY Address: 12599 NW 107TH AVENUE City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: MEDLEY, FL 33178

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name:REISWEITZ, ANNIEName:REISWEITZ, ANNIEAddress:3601 RICKENBACHER CAUSEWAYAddress:12599 NW 107TH AVENUECity-St-Zip:KEY BISCAYNE, FL 33149City-St-Zip:MEDLEY, FL 33178

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 STREETER D 12/07/2006