## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000012420

FILED May 30, 2009 Secretary of State

Entity Name: COSTA DEL SOL OF JACKSONVILLE BEACH CONDOMINIUM ASSOCIATION, INC.

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

820 2ND ST SOUTH 820 2ND ST SOUTH

UNIT A UNIT B

JACKSONVILLE BEACH, FL 32250 JACKSONVILLE BEACH, FL 32250

Current Mailing Address: New Mailing Address:

820 2ND ST SOUTH 15920 SW 87 AVENUE UNIT A PALMETTO BAY, FL 33157

JACKSONVILLE BEACH, FL 32250

FEI Number: 20-4026949 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: Name and Address of New Registered Agent:

PATTERSON, BOND & LATSHAW, P.A.

3010 SOUTH THIRD STREET

JACKSONVILLE, FL 32250 US

BOURJAILY, CECILIA
15920 SW 87 AVENUE
PALMETTO BAY, FL 33157 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: CECILIA BOURJAILY 05/30/2009

Electronic Signature of Registered Agent Date

Address:

## **OFFICERS AND DIRECTORS:**

820 2ND ST SOUTH UNIT C

Address:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

820 2ND ST SOUTH UNIT B

le: DPST ( ) Delete Title: DPST (X) Change ( ) Addition

 Name:
 REAVES, HOLLY
 Name:
 BOURJAILY, CECILIA

 Address:
 820 2ND ST SOUTH UNIT A
 Address:
 15920 SW 87 AVENUE

 City-St-Zip:
 JACKSONVILLE BEACH, FL 32250
 City-St-Zip:
 PALMETTO BAY, FL 33157

Title: DVP ( ) Delete Title: DVP (X) Change ( ) Addition Name: HASSEN, GEORGE Name: STEPHENSON, CHRIS

City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250

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

Name: HASSEN, CICI Name: HASSAN, CECILIA

Address: 820 2ND ST SOUTH UNIT C Address: 3273 MATILDA STREET City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: MIAMI, FL 33133

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: CECILIA BOURJAILY DPST 05/30/2009