

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000003474

FILED
Oct 09, 2007
Secretary of State

Entity Name: THE VILLAGE OF KEY BISCAYNE PROPERTY TAXPAYERS ASSOCIATION INC.

Current Principal Place of Business:

128 W MASHTA DR
KEY BISCAYNE, FL 33149

New Principal Place of Business:

260 CYPRESS DRIVE
KEY BISCAYNE, FL 33149

Current Mailing Address:

128 W MASHTA DR
KEY BISCAYNE, FL 33149

New Mailing Address:

260 CYPRESS DRIVE
KEY BISCAYNE, FL 33149

FEI Number: 13-4342136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTRO, HECTOR
128 W MASHTA DR
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

SANCHEZ, EDUARDO
260 CYPRESS DRIVE
KEY BISCAYNE, FL 33149 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: EDUARDO SANCHEZ

10/09/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIR. () Delete
Name: CASTRO, HECTOR
Address: 128 W MASHTA DR
City-St-Zip: KEY BISCAYNE, FL 33149

Title: DIR. () Delete
Name: SANCHEZ, EDUARDO
Address: 260 CYPRESS DR
City-St-Zip: KEY BISCAYNE, FL 33149

Title: DIR () Delete
Name: ROMANO, PATRICIA
Address: 361 BEECHWOOD DR
City-St-Zip: KEY BISCAYNE, FL 33149

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 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: EDUARDO SANCHEZ

D

10/09/2007

Electronic Signature of Signing Officer or Director

Date