## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N06000005395

Oct 25, 2009 Secretary of State

Entity Name: TROPICAL BREEZE CONDOMINIUM ASSOCIATION, INC.

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

8640 SEMINOLE BOULEVARD SEMINOLE, FL 33772

**Current Mailing Address: New Mailing Address:** 

PO BOX 67132 ST PETE BEACH, FL 33736

FFI 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:

HOFSTRA, PETER T 8640 SEMINOLE BOULEVARD SEMINOLE, FL 33772

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: BRENT RUSSELL

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete PRICE, TERRANCE SCHNIEDER, BRYAN Name: Name:

12971 PELICAN LANE Address: 525 73RD AVE #4 Address: City-St-Zip: MADEIRA BEACH, FL 33708 City-St-Zip: ST PETE BEACH, FL 33706

Title: VD () Delete Title: VD (X) Change ( ) Addition Name: TAYLOR, ELIZABETH Name: PRICE, ALMA

Address: 6507 DEBBIE LANE SOUTH Address: PO BOX 8102 City-St-Zip: ST. PETERSBURG, FL 33707 City-St-Zip:

MADEIRA BEACH, FL 33738

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

PRICE, ALMA Name: RUSSELL, BRENT Name: 12971 PELICAN LANE 9125 ROYAL GATE DRIVE Address: Address: City-St-Zip: MADEIRA BEACH, FL 33708 City-St-Zip: WINDERMERE, FL 34786

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: BRENT RUSSELL ST 10/25/2009