

2007-NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

2007 NOV 13 PM 4:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N06000005654 1. Entity Name HARBOUR VILLAGE YACHT CLUB, INC.	
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Principal Place of Business 3801 PLAZA TOWER DR BATON ROUGE, LA 70816	Mailing Address 3801 PLAZA TOWER DR BATON ROUGE, LA 70816
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2. Principal Place of Business - No P.O. Box # 3001 W 10 th Street Suite, Apt. #, etc.	3. Mailing Address 3001 W 10 th Street Suite, Apt. #, etc.
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10082007 REIN-NP CR2E099 (1/07)

City & State Panama City FL Zip 32401	City & State Panama City FL Zip 32401
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4. FEI Number 20-5875803	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

LEEBRICK, BRIAN D ESQ.
 220 MCKENZIE AVE
 PANAMA CITY, FL 32401

7. Name and Address of New Registered Agent

Name Douglas L. Smith, Esq.
 Street Address (P.O. Box Number is Not Acceptable)
2-21 McKenzie Avenue
 City Panama City FL Zip Code 32401

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Douglas L. Smith* 10/19/07
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating. DATE

FILE NOW!!! FEE IS \$61.25 After January 1, 2008, Fee will be \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP JUNEAU, NEIL R 3801 PLAZA TOWER DR BATON ROUGE, LA 70816 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ROBBINS, BOB 766 W 23RD ST PANAMA CITY, FL 32405 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST SIEBERT, SEAN P 3801 PLAZA TOWER DR BATON ROUGE, LA 70816 <input type="checkbox"/> Delete <i>Address correction</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT MORRIS LEAVINS 3001 W 10 th ST - UNIT 209 PANAMA CITY FL 32401 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NATHAN MILLER VICE PRESIDENT 3001 W 10 th ST - UNIT 213 PANAMA CITY FLORIDA 32401 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEAN Siebert 4101 PLAZA TOWER DRIVE BATON ROUGE, LA 70816 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	800112242118 11/13/07--01073--004 **\$61.25 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Marcus* 10/17/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

11/15/07