

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000009850

FILED  
Nov 02, 2008  
Secretary of State

**Entity Name:** GARDEN BAY COLONY HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

21 ROYAL PALM POINTE, STE. 100  
C/O LAW OFFICES OF SAMUEL A. BLOCK, P.A.  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

21 ROYAL PALM POINTE, STE. 100  
C/O LAW OFFICES OF SAMUEL A. BLOCK, P.A.  
VERO BEACH, FL 32960

**New Mailing Address:**

**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:**

BLOCK, SAMUEL A ESQ.  
21 ROYAL PALM POINTE, STE. 100  
C/O LAW OFFICES OF SAMUEL A. BLOCK, P.A.  
VERO BEACH, FL 32960 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: SAMUEL A BLOCK

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: FAIRES, JUSTIN  
Address: 905 LIVE OAK ROAD  
City-St-Zip: VERO BEACH, FL 32963

Title: VS ( ) Delete  
Name: BLOCK, SAMUEL  
Address: 21 ROYAL PALM POINTE, SUITE 100  
City-St-Zip: VERO BECH, FL 32960

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: FAIRES, JUSTIN  
Address: PO BOX 643372  
City-St-Zip: VERO BEACH, FL 32963

Title: VS (X) Change ( ) Addition  
Name: BLOCK, SAMUEL A ESQ  
Address: 21 ROYAL PALM POINTE, SUITE 100  
City-St-Zip: VERO BECH, FL 32960

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: JUSTIN S FAIRES

PT

11/02/2008

Electronic Signature of Signing Officer or Director

Date