

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N08000004932

**FILED**  
**Apr 07, 2012**  
**Secretary of State**

**Entity Name:** SOUTH BEACH ALLIANCE OF NEIGHBORHOODS, INC.

**Current Principal Place of Business:**

1801 MARIETTA DRIVE  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

1801 MARIETTA DRIVE  
FORT LAUDERDALE, FL 33316

**New Mailing Address:**

**FEI Number:** 26-4076317

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ELLIS, EUGENIA D  
1801 MARIETTA DRIVE  
FORT LAUDERDALE, FL 33316 US

**Name and Address of New Registered Agent:**

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:** EUGENIA D. ELLIS

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** ELLIS, EUGENIA D  
**Address:** 1801 MARIETTA DRIVE  
**City-St-Zip:** FORT LAUDERDALE, FL 33316 US

**Title:** VP  
**Name:** ROSS, ROBERT  
**Address:** 2543 LUCILLE DRIVE  
**City-St-Zip:** FORT LAUDERDALE, FL 33316 US

**Title:** SEC  
**Name:** ELLIS, THEODORE R  
**Address:** 1801 MARIETTA DRIVE  
**City-St-Zip:** FORT LAUDERDALE, FL 33316 US

**Title:** TREA  
**Name:** ROSS, ANNETTE C  
**Address:** 2543 LUCILLE DRIVE  
**City-St-Zip:** FORT LAUDERDALE, FL 33316 US

**Title:** DIR  
**Name:** GATTUSO, JOHN  
**Address:** 1925 S. OCEAN DRIVE  
**City-St-Zip:** FORT LAUDERDALE, FL 33316 US

**Title:** DIR  
**Name:** KELLEY, PATRICK  
**Address:** 1942 TWIN DOLPHIN DRIVE  
**City-St-Zip:** FORT LAUDERDALE, FL 33316 US

I hereby 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 all other like empowered.

**SIGNATURE:** EUGENIA D. ELLIS

PRES

04/07/2012

Electronic Signature of Signing Officer or Director

Date