

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09000001005

**FILED**  
**Apr 30, 2014**  
**Secretary of State**

**Entity Name:** MERRYPLACE PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1715 DIVISION AVENUE  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

1715 DIVISION AVENUE  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURNETT, CHARLOTTE ESQ,  
1715 DIVISION AVENUE  
WEST PALM BEACH, FL 33407 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: CHARLOTTE BURNETT

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P,D  
Name: ROBINSON, LAUREL  
Address: 1715 DIVISION AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D,CP  
Name: STARR, THYRRA  
Address: 1715 DIVISION AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D,VC  
Name: ST LAWRENCE, CHARLES  
Address: 1715 DIVISION AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D,ST  
Name: GOOMBS, PHILLIP  
Address: 1715 DIVISION AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33407

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: LAUREL ROBINSON

P

04/30/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date