

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N11657

FILED
Oct 28, 2007
Secretary of State

Entity Name: SIXTY-TWO TWELVE BAYSHORE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6212 BAYSHORE BLVD
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

6212 BAYSHORE BLVD
TAMPA, FL 33611

New Mailing Address:

FEI Number: 59-2821105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ED SAVITZ
BUSH ROSS
220 S FRANKLIN ST
TAMPA, FL 33602 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: ED SAVITZ

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LUX, STEVE
Address: 6212-A BAYSHORE BLVD.
City-St-Zip: TAMPA, FL 33611

Title: TD () Delete
Name: O'KELLEY, CHARLES,
Address: 6212-J BAYSHORE BLVD.
City-St-Zip: TAMPA, FL

Title: DS () Delete
Name: TOPE, KIMBERLY
Address: 6212 E BAYSHORE BLVD
City-St-Zip: TAMPA, FL

Title: PD () Delete
Name: DAVIS, BOB
Address: 6212 I BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: BATES, SANDRA
Address: 6212 L BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: LUX, STEVE
Address: 6212-A BAYSHORE BLVD.
City-St-Zip: TAMPA, FL 33611

Title: D (X) Change () Addition
Name: CARSWELL, HAYNES
Address: 6212-B BAYSHORE BLVD.
City-St-Zip: TAMPA, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: STALLWORTH, SHELLY
Address: 6212 H BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33611

Title: PD (X) Change () Addition
Name: BATES, SANDRA
Address: 6212 L BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33611

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: STEVE LUX

T

10/28/2007

Electronic Signature of Signing Officer or Director

Date