



2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N17377 1. Entity Name KENT H CONDOMINIUM ASSOCIATION, INC.						FILED 06 APR -6 AM 11:07 STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 132 KENT H 132 WEST PALM BEACH, FL 33417		Mailing Address 132 KENT H 132 WEST PALM BEACH, FL 33417					
2. Principal Place of Business 127 KENT H Suite, Apt. #, etc. 127 City & State WEST PALM BEACH FL 33417		3. Mailing Address 127 KENT "H" Suite, Apt. #, etc. 127 City & State WEST PALM BEACH					
Zip 33417 Country PALMBEACH		Zip 33417 Country PALMBEACH		4. FEI Number 59-1640799			
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				03212006 REIN-NP CR2E099 (1/1/05) 05-06			
6. Name and Address of Current Registered Agent SEIDEL, BEVERLY 132 KENT H WEST PALM BEACH, FL 33417-7602				7. Name and Address of New Registered Agent Name: ROGER GROULX Street Address (P.O. Box Number is Not Acceptable): 127 KENT "H" BLDG City: WEST PALM BEACH FL Zip Code: 33417			
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: <i>ROGER GROULX P.</i> <i>Roger Groulx</i> <i>March/23rd/06</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
FILE NOW!!! FEE IS \$297.50				Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GROULX, ROGER 127 KENT H WEST PALM BEACH, FL 334177302	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. GROULX, ROGER 127 KENT H WPB FL 33417-	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition (TITLE)		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SHOLLENBERGER, BRUCE 132 KENT H WEST PALM BEACH, FL 334177602	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VELLEUX, ROGER 124 KENT H WEST PALM BEACH FL 33417	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FOURNIER, MICHELE 118 KENT H WEST PALM BEACH, FL 334177602	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MILLER, LORRAINE WEST PALM BEACH 33417	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BA DECARONS, LOUIS 131 KENT H WEST PALM BEACH, FL 334177302	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DECAROLIS, LOUIE 131 KENT H WPB 33417	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SEIDEL, BEVERLY 132 KENT H WEST PALM BEACH, FL 334177602	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHEEHAN, DOROTHY 2708 TENNIS CLUB DRIVE WEST PALM BEACH 33417	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	- - - -	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Signature) 100070800274 03/06--01036--020 **306.25	<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 attached sheet with an address, with all other like information.							
SIGNATURE: <i>Roger Groulx (ROGER GROULX)</i> <i>MARCH/23/06</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>							
561-683-5577							