

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N30425

FILED
Nov 01, 2007
Secretary of State

Entity Name: THE MOORINGS OF CAPE CORAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

18557 IRIS ROAD
FORT MYERS, FL 33912 US

New Principal Place of Business:

6719 WINKLER ROAD
SUITE 200
FORT MYERS, FL 33919 US

Current Mailing Address:

P.O. BOX 212
ESTERO, FL 33928

New Mailing Address:

6719 WINKLER ROAD
SUITE 200
FORT MYERS, FL 33919

FEI Number: 65-0200736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWBERRY, LORIANN CAM
18557 IRIS ROAD
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD
200
FORT MYERS, FL 33919 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: JOHN J. STROHM

11/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BEIER, ALFRED
Address: P.O. BOX 212
City-St-Zip: ESTERO, FL 32928

Title: VPD () Delete
Name: WHEELER, HARRY
Address: P.O. BOX 212
City-St-Zip: ESTERO, FL 32928

Title: SD () Delete
Name: ELLIS, CURLY
Address: P.O. BOX 212
City-St-Zip: ESTERO, FL 32928

Title: TD () Delete
Name: MC LAUGHLIN, DONALD
Address: P.O. BOX 212
City-St-Zip: ESTERO, FL 32928

Title: D (X) Delete
Name: ASHWORTH, BOB
Address: P.O. BOX 212
City-St-Zip: ESTERO, FL 32928

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BEIER, ALFRED
Address: 4622 SW 12 PLACE #120
City-St-Zip: CAPE CORAL, FL 33914

Title: SD (X) Change () Addition
Name: WHEELER, HARRY
Address: 4634 SW 12TH PLACE #215
City-St-Zip: CAPE CORAL, FL 33914

Title: TD (X) Change () Addition
Name: MCLAUGHLIN, DONALD
Address: 4622 SW 12TH PLACE #220
City-St-Zip: CAPE CORAL, FL 33914

Title: VPD (X) Change () Addition
Name: ASHFORD, ROBERT
Address: 4620 SW 12TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

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

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: DONALD MCLAUGHLIN

TD

11/01/2007

Electronic Signature of Signing Officer or Director

Date