

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N33803

FILED
Oct 31, 2008
Secretary of State

Entity Name: HERITAGE ON THE BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5415 MARINER STREET
WATERMARK 5
TAMPA, FL 33609 US

New Principal Place of Business:

5415 MARINER STREET
WATERMARK 5, SUITE 200
TAMPA, FL 33609 US

Current Mailing Address:

5415 MARINER STREET
WATERMARK 5
TAMPA, FL 33609 US

New Mailing Address:

5415 MARINER STREET
WATERMARK 5, SUITE 200
TAMPA, FL 33609 US

FEI Number: 38-2460647 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GARDNER, MERRITT A
5415 MARINER STREET
WATERMARK 5
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

GARDNER, MERRITT A
5415 MARINER STREET
WATERMARK 5, SUITE 200
TAMPA, FL 33609 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: GARDNER, MERRITT

10/31/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: CROWHURST, GEORGE
Address: 1234 PARK STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: DS () Delete
Name: MURRY-CROWHURST, SYLVIA
Address: 1234 PARK STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: D (X) Delete
Name: GARDNER, MERRITT A
Address: 401 E JACKSON ST STE 2650
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change () Addition
Name: CROWHURST, SYLVIA
Address: 1234 PARK STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

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: CROWHURST, SYLVIA

DS

10/31/2008

Electronic Signature of Signing Officer or Director

Date