2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 06, 2009
Secretary of State

DOCUMENT# N93000001646

Entity Name: CONDOMINIUM GARAGES OF NEW SMYRNA BEACH OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

454 DESOTO DR.
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

Current Mailing Address:

454 DESOTO DR.
NEW SMYRNA BEACH, FL 32169 US

New Mailing Address:

FEI Number: 59-3198017 **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:

HICKMAN, CHRISINE
454 DESOTO DR.
NEW SMYRNA BEACH, FL 32169 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: CHRISTINE HICKMAN
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PTDS ( ) Delete
Name: HICKMAN, CHRISTINE
Address: 454 DESOTO DR.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: DT ( ) Delete
Name: HARTLAND, ROBERT
Address: 454 DESOTO DR.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: DT ( ) Delete
Name: FLIPPIN, TAMARA
Address: 454 DESOTO DR.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CHRISTINE HICKMAN PTDS 10/06/2009
Electronic Signature of Signing Officer or Director — Date