2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 02, 2004
Secretary of State

DOCUMENT# N93000003395

Entity Name: PAULSON DRIVE WAREHOUSE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

18316 BRIDGETTE AVENUE
PT CHARLOTTE, FL 33948 US

New Principal Place of Business:

18350 PAULSON DRIVE
PT CHARLOTTE, FL 33948 US

Current Mailing Address:

18316 BRIDGETTE AVENUE
PT CHARLOTTE, FL 33948 US

New Mailing Address:

100 SULLIVAN STREET
112
PUNTA GORDA, FL 33950 US

FEI Number: 65-0449566 **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:

OAKS, DAVID K PA
407 E MARION AVENUE
101
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

GREENE, JOAN F
100 SULLIVAN STREET
112
PUNTA GORDA, FL 33950 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: JOAN F. GREENE 11/02/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: BROWN, GREGG
Address: 18316 BRIDGETTE AVENUE
City-St-Zip: PT CHARLOTTE, FL 33948 US

Title: DS ( ) Delete
Name: TOMPKINS, MELISSA
Address: 18350 PAULSON DRIVE UNIT A-3
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: DVP ( ) Delete
Name: BROWN, BARBARA
Address: 18350 PAULSON DR A1
City-St-Zip: PORT CHARLOTTE, FL 33954

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change ( ) Addition
Name: SCHIANO, SALVATORE
Address: 18350 PAULSON DRIVE UNIT B-1
City-St-Zip: PT CHARLOTTE, FL 33948 US

Title: DP (X) Change ( ) Addition
Name: TOMPKINS, MELISSA
Address: 18350 PAULSON DRIVE UNIT A-3
City-St-Zip: PORT CHARLOTTE, FL 33954

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MELISSA TOMPKINS PRES 11/02/2004
Electronic Signature of Signing Officer or Director Date