

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

Page 1 of 3

DOCUMENT # N95000000666

1. Entity Name
SEA ESTA PARK MOBILE TENANTS ASS., INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JAN 13 AM 8:39

Principal Place of Business
332 SEA ESTA LANE
HALLANDALE, FL 33009 US

Mailing Address
332 SEA ESTA LANE
HALLANDALE, FL 33009 US

REINSTATEMENT 05-06



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
307 Sea Esta
HALLANDALE
City & State
Zip Country

12022005 REIN-NP CR2E099 (6/04)

6. Name and Address of Current Registered Agent
DECHAMPLAIN, ROSE
307 SEA ESTA
HALLANDALE, FL 33009

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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: ROBERT ST-PIERRE Robert St-Pierre January 06, 2006
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$236.25
After January 1, 2006, Fee will be \$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	P COMTOIS, MARCEL President 301 6 N.E. ST. HALLANDALE, FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBERT ST-PIERRE 11589 325 SEA ESTA LANE HALLANDALE, FL 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS ROSE, DECHAMPLAIN See tree 307 SEA ESTA LANE HALLANDALE, FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	900062111989 01/13/06--01005--001 **175.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMEL, LUCIEN Director 306 NE 7TH STREET HALLANDALE, FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCEL COMTOIS 301-6 N.E. ST HALLANDALE, FL 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Gugue Benoit 335 6 st Hallandale FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JEAN MARIE ROBERT 331 - 6 NE ST. HALLANDALE, FL 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bendreau Marcel 317 6 st Hallandale FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAYMOND TOUSIGNANT 318 SEA ESTA LANE HALLANDALE, FL 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 attachment with an address, with all other like empowered.

SIGNATURE: Robert St-Pierre president, 20 dec 2005
Typed or printed name of signing officer or director Date Daytime Phone #

954-458-4022