

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000001840

FILED
Nov 12, 2008
Secretary of State

Entity Name: HOMEOWNERS' ASSOCIATION OF CORAL COAST, INC.

Current Principal Place of Business:

KEY LARGO, FLORIDA
CORAL COAST SUBDIVISION
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

PO BOX 9566
TAVERNIER, FL 33070

New Mailing Address:

FEI Number: 65-0665847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMMERSTROM, JOHN
115 COASTAL DRIVE
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

GEORGE, NYMAN
113 COASTAL DRIVE
KEY LARGO, FL 33037 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: GEORGE NYMAN

11/12/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAMMERSTROM, JOHN
Address: P.O. BOX 860
City-St-Zip: TAVERNIER, FL 33070

Title: VPD () Delete
Name: QUINTYNE, CHESLER
Address: 121 SEVENNO DRIVE
City-St-Zip: ISLAMORADA, FL 33036

Title: TD () Delete
Name: JURADO, ANA
Address: 108 COASTAL DRIVE
City-St-Zip: KEY LARGO, FL 33037

Title: SD () Delete
Name: NYMAR, SHARON
Address: 113 COASTAL DRIVE
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: ABRUDSKY, NATALIO
Address: 1470-R NW 107TH AVE
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NYMAN, GEORGE
Address: 113 COASTAL DRIVE
City-St-Zip: KEY LARGO, FL 330737

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

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

Title: SD (X) Change () Addition
Name: NYMAN, SHARON
Address: 113 COASTAL DRIVE
City-St-Zip: KEY LARGO, FL 33037

Title: D (X) Change () Addition
Name: JURADO, JOSE
Address: 108 COASTAL DRIVE
City-St-Zip: KEY LARGO, FL 33037

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: SHARON NYMAN

SD

11/12/2008

Electronic Signature of Signing Officer or Director

Date