2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000059329

Entity Name: BAREFOOT BEACH VACATION RENTALS, INC.

FILED Jan 08, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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13238 GULF BLVD. 19417 GULF BLVD.

MADEIRA BEACH, FL 33708 INDIAN SHORES, FL 33785

Current Mailing Address: New Mailing Address:

13238 GULF BLVD. 19417 GULF BLVD.

MADEIRA BEACH, FL 33708 INDIAN SHORES, FL 33785

FEI Number: 33-1137268 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSENBERG, DAVID H ESQ. 6151 LAKE OSPREY DRIVE THIRD FLOOR, SUITE 338 SARASOTA, FL 34240 US ROSENBERG, DAVID H ESQ. 8130 LAKEWOOD MAIN STREET SECOND FLOOR, SUITE 208 LAKEWOOD RANCH, FL 34202 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: DAVID H. ROSENBERG 01/08/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: PRIAKOS, WILLIAM H PRIAKOS, WILLIAM H

Address: 13238 GÚLF BLVD. Address: 19417 GULF BLVD.
City-St-Zip: MADEIRA BEACH, FL 33708 City-St-Zip: INDIAN SHORES, FL 33785

 Title:
 ST
 () Delete
 Title:
 ST
 (X) Change () Addition

 Name:
 HUFFMAN, AARON
 Name:
 PRIAKOS, KATHLEEN M

Address: 13238 GULF BLVD. Address: 19417 GULF BLVD.
City-St-Zip: MADEIRA BEACH, FL 33708 City-St-Zip: INDIAN SHORES, FL 33785

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 HUFFMAN, AARON

 Address:
 Address:
 19417 GULF BLVD.

 City-St-Zip:
 City-St-Zip:
 INDIAN SHORES, FL 33785

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM H. PRIAKOS P 01/08/2008