

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000074685

FILED
Oct 19, 2009
Secretary of State

Entity Name: CORAL REEF TROPICAL POOLS, INC.

Current Principal Place of Business:

1A BARRACUDA LANE
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

1A BARRACUDA LANE
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 65-0943112 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KERSHNER, CLAUDE III
1A BARRACUDA LANE
KEY LARGO, FL 33037 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: CLAUDE B. KERSHNER, III

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:

Title: PSTD () Delete
Name: KERSHNER, CLAUDE III
Address: 6 BARRACUDA LANE
City-St-Zip: KEY LARGO, FL 33037

Title: VD () Delete
Name: DECKER, MICHAEL
Address: 7360 SW 165 ST
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: TERRY, RICHARD
Address: 6 BARRACUDA LANE
City-St-Zip: KEY LARGO, FL 33037

Title: ST () Delete
Name: KERSHNER, CLAUDE III
Address: 6 BARRACUDA LANE
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: TERRY, RICHARD
Address: 6 BARRACUDA LANE
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: KERSHNER, CLAUDE III
Address: 3850 IRVINGTON AVE
City-St-Zip: MIAMI, FL 33133

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

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

Title: ST (X) Change () Addition
Name: KERSHNER, CLAUDE III
Address: 3850 IRVINGTON AVE
City-St-Zip: MIAMI, FL 33133 US

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

SIGNATURE: CLAUDE B. KERSHNER, III

PD

10/19/2009

Electronic Signature of Signing Officer or Director

Date