

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N04000002533

**FILED**  
**Jan 03, 2011**  
**Secretary of State**

**Entity Name:** HILLTOP PRESERVE HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

6024 ROLLING VISTA LOOP  
DOVER, FL 33527

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 902  
DOVER, FL 33527

**New Mailing Address:**

**FEI Number:** 26-2151607

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

J. MICHAEL SMITH CPA  
SMITH & ASSOCIATES CPA'S PA  
1601 RICKENBACKER DR. SUITE 9  
SUN CITY CENTER, FL 33573 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: J MICHEAL SMITH CPA

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SMITH, ROBERT J  
Address: 6024 ROLLING VISTA LOOP  
City-St-Zip: DOVER, FL 33527

Title: VD  
Name: PERGAMENT, DANIEL  
Address: 6031 ROLLING VISTA LOOP  
City-St-Zip: DOVER, FL 33527

Title: SD  
Name: PEREZ, SANDY  
Address: 6022 ROLLING VISTA LOOP  
City-St-Zip: DOVER, FL 33527

Title: TD  
Name: SMITH, JOHN M  
Address: 6013 ROLLING VISTA LOOP  
City-St-Zip: DOVER, FL 33527

I hereby 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 all other like empowered.

SIGNATURE: JOHN M SMITH

TREA

01/03/2011

Electronic Signature of Signing Officer or Director

Date