

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 11, 2006
Secretary of State

DOCUMENT# N05000000171

Entity Name: RAVINES CROSSING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3108 U.S. HIGHWAY 17 SOUTH
ORANGE PARK, FL 32073

New Principal Place of Business:

4213 COUNTRY RD 218
SUITE 1
MIDDLEBURG, FL 32068

Current Mailing Address:

3108 U.S. HIGHWAY 17 SOUTH
ORANGE PARK, FL 32073

New Mailing Address:

P.O. BOX 949
MIDDLEBURG, FL 32050

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RAX CO.
50 N. LAURA STREET, STE. 3300
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

AWAKENINGS ASSOCIATION MANAGEMENT
4213 COUNTY ROAD #218
SUITE 1
MIDDLEBURG, FL 32068 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: VINA C. DELCOMYN

10/11/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVS () Delete
Name: YONGE, PHILLIP D.
Address: 3108 U.S. HIGHWAY 17 SOUTH
City-St-Zip: ORANGE PARK, FL 32073

Title: DPT () Delete
Name: ARAMOONIE, EMIL S.
Address: 3108 U.S. HIGHWAY 17 SOUTH
City-St-Zip: ORANGE PARK, FL 32073

Title: D () Delete
Name: MURPHY, MONTY
Address: 3108 U.S. HIGHWAY 17 SOUTH
City-St-Zip: ORANGE PARK, FL 32073

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CUMBAA, FRANK
Address: 4048 HALFMOON CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

Title: VPD (X) Change () Addition
Name: MILLER, EDWARD
Address: 4044 HALF MOON CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

Title: SD (X) Change () Addition
Name: LUKSIC, DORIS
Address: 4012 HALF MOON CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

Title: TD () Change (X) Addition
Name: HOWARD, PAUL
Address: 4063 HALF MOON CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Change (X) Addition
Name: GIBB, STEVEN
Address: 4025 HALF MOON CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANK CUMBAA

PD

10/11/2006

Electronic Signature of Signing Officer or Director

Date