

2017 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000009443

**FILED
Nov 15, 2017
Secretary of State
CR8615701601**

Entity Name: STRAWBERRY FIELDS OF GAINESVILLE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O MATCHMAKER REALTY OF ALACHUA COUNTY INC
3947 WEST NEWBERRY RD
GAINESVILLE, FL 32607

Current Mailing Address:

C/O MATCHMAKER REALTY OF ALACHUA COUNTY INC
3947 WEST NEWBERRY RD
GAINESVILLE, FL 32607 US

FEI Number: 20-4684615

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATCHMAKER REALTY OF ALACHUA COUNTY INC
MATCHMAKER REALTY OF ALACHUA COUNTY INC
3947 WEST NEWBERRY RD
GAINESVILLE, FL 32607 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: CHER MUSGROVE

11/15/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name JOEL, REYNOLDS
Address 14177 NW 10TH RD
City-State-Zip: NEWBERRY FL 32669

Title DV
Name SOLANO, DANIEL
Address 14122 NW 10TH ROAD
City-State-Zip: NEWBERRY FL 32669

Title DIRECTOR
Name WILSON, RONALD
Address 14119 NW 9TH ROAD
City-State-Zip: NEWBERRY FL 32669

Title DIRECTOR
Name DERENDORF, KARSTEN
Address 8708 SW 42ND PLACE
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name JOHNSON, DAWN
Address 14054 NW 10TH ROAD
City-State-Zip: NEWBERRY FL 32669

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: JOEL REYNOLDS

PRESIDENT

11/15/2017

Electronic Signature of Signing Officer/Director Detail

Date