

**2016 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N05000009443

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

**FILED**  
**Sep 30, 2016**  
**Secretary of State**  
**CR1516184872**

**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

09/30/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

Title DT  
Name DANIEL, SAMPLES  
Address 14125 NW 10TH RD  
City-State-Zip: NEWBERRY FL 32669

Title DV  
Name DAVID, TREADWAY  
Address 14291 NW 9TH RD  
City-State-Zip: NEWBERRY FL 32669

Title DS  
Name PARKYN, DARYL  
Address 14110 NW 10TH RD  
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

09/30/2016

Electronic Signature of Signing Officer/Director Detail

Date