

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 342544

FILED
Oct 01, 2009
Secretary of State

Entity Name: HILLSMAN PROPERTIES, INC.

Current Principal Place of Business:

320 KNOX MCRAE DRIVE
TITUSVILLE, FL 32780

New Principal Place of Business:

189 CHURCHILL DRIVE
SPARTA, TN 38583

Current Mailing Address:

320 KNOX MCRAE DRIVE
TITUSVILLE, FL 32780

New Mailing Address:

189 CHURCHILL DRIVE
SPARTA, TN 38583

FEI Number: 59-1269924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESNICK, DAVID M
96 WILLARD STREET
COCOA, FL 32922 US

Name and Address of New Registered Agent:

PRESNICK, DAVID M
96 WILLARD STREET
SUITE 202
COCOA, FL 32922 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: DAVID PRESNICK

10/01/2009

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: VD () Delete
Name: SPEAR, SHERRY L.
Address: 189 CHURCHILL DRIVE
City-St-Zip: SPARTA, TN 385831524

Title: PD () Delete
Name: HILLSMAN, RODNEY A
Address: 189 CHURCHILL DRIVE
City-St-Zip: SPARTA, TN 385831524

Title: D () Delete
Name: HILLSMAN, CYRUS C.
Address: 189 CHURCHILL DRIVE
City-St-Zip: SPARTA, TN 385831524

Title: STD () Delete
Name: MYERS, PAMELA K
Address: 189 CHURCHILL DRIVE
City-St-Zip: SPARTA, TN 385831524

Title: D () Delete
Name: GILMORE, CHERYL L
Address: 189 CHURCHILL DRIVE
City-St-Zip: SPARTA, TN 385831524

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: RODNEY HILLSMAN

PD

10/01/2009

Electronic Signature of Signing Officer or Director

Date