

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 713452

FILED  
Oct 15, 2009  
Secretary of State

**Entity Name:** HIGHLANDS PRESBYTERIAN CHURCH

**Current Principal Place of Business:**

1001 NORTHEAST 16 AVENUE  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

1001 NORTHEAST 16 AVENUE  
GAINESVILLE, FL 32601

**New Mailing Address:**

**FEI Number:** 59-1209611      **FEI Number Applied For ( )**      **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:**

LANE, H T  
8001 SW 30TH AVE  
GAINESVILLE, FL 32607      US

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

DONOVAN, JACK  
1001 NE 16TH AVENUE  
GAINESVILLE, FL 32601      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: JACK DONOVAN

10/15/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: LATHAM, MARY  
Address: 1612 NE 40TH PLACE  
City-St-Zip: GAINESVILLE, FL 32609

Title: VP      (X) Delete  
Name: MADRY, JOYCE  
Address: 8226 SW 36TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32608

Title: T      ( ) Delete  
Name: MALONE, ROBERT  
Address: 1330 NW 25TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: S      ( ) Delete  
Name: WOMELDORF, SELMER F  
Address: 1621 NE WALDO ROAD  
City-St-Zip: GAINESVILLE, FL 32609

**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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACK DONOVAN

RA

10/15/2009

Electronic Signature of Signing Officer or Director

Date