

# 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 714993

**FILED**  
**Mar 07, 2012**  
**Secretary of State**

**Entity Name:** MACEDONIA HOUSING AUTHORITY, INC.

**Current Principal Place of Business:**

1722 WEST 17TH STREET  
PANAMA CITY, FL 32405 US

**New Principal Place of Business:**

715 MARTIN LUTHER KING JR BLVD  
PANAMA CITY, FL 32401 US

**Current Mailing Address:**

101 NW 75TH STREET  
SUITE 2  
GAINESVILLE, FL 32607

**New Mailing Address:**

P.O. BOX 35125  
PANAMA CITY, FL 32412

**FEI Number:** 59-1276093

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MANAGEMENT SPECIALISTS  
101 NW 75TH STREET  
SUITE 2  
GAINESVILLE, FL 32607 US

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

EDWARDS, ALVIN D  
2623 EAST 37TH STREET  
PANAMA CITY, FL 32405 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: ALVIN EDWARDS

03/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GLASS, LORETTA  
Address: 921 N. CENTER AVE.  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: ROBINSON, ERNEST  
Address: 1018 E. 7TH COURT  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: HILL, EMMETT  
Address: 6425 MINNEOLA ST  
City-St-Zip: CALLAWAY, FL 32405

Title: D  
Name: MYERS, TIMOTHY  
Address: 7307 RODGERS DR  
City-St-Zip: CALAWAY, FL 32404

Title: D  
Name: EDWARDS, ALVIN  
Address: 2623 E 37TH ST  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: MCINTYRE, VERYL J  
Address: 1307 MICHIGAN AVE  
City-St-Zip: LYNN HAVEN, FL 32444

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: ALVIN EDWARDS

D

03/07/2012

Electronic Signature of Signing Officer or Director

Date