2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Jul 24, 2009
Secretary of State

DOCUMENT# 726811

Entity Name: ACADEMY HILL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7800 NW 70TH CT.
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 25551
TAMARAC, FL 33320 US

New Mailing Address:

FEI Number: 59-1410776 **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:

GRIFFITHS, SUSAN
7106 NW 78TH AVE
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

GRIFFITHS, SUSAN M T
7106 NW 78TH AVE
TAMARAC, FL 33321 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: SUSAN GRIFFITHS 07/24/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DOURVETAKIS, LISA
Address: 4901 SW 90TH AVE
City-St-Zip: COOPER CITY, FL 33324

Title: T ( ) Delete
Name: GRIFFITHS, SUSAN
Address: 7106 NW 78TH AVENUE
City-St-Zip: TAMARAC, FL 33321

Title: S ( ) Delete
Name: FEDDISH, JANET
Address: 7109 NW 78TH AVE
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: WINEMILLER, EMMA
Address: 7005 NW 78TH TERR
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DOURVETAKIS, LISA P
Address: 4901 SW 90TH AVE
City-St-Zip: COOPER CITY, FL 33324

Title: T (X) Change ( ) Addition
Name: GRIFFITHS, SUSAN M T
Address: 7106 NW 78TH AVENUE
City-St-Zip: TAMARAC, FL 33321

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

Title: D (X) Change ( ) Addition
Name: AXELROD, MARCIA O D
Address: 7635 SOUTHAMPTON TERRACE #310
City-St-Zip: TAMARAC, FL 33321

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: SUSAN GRIFFITHS T 07/24/2009
Electronic Signature of Signing Officer or Director Date