

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000006199

FILED
Dec 05, 2006
Secretary of State

Entity Name: CURRY ACRES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1310 OAK TREE LANE
NOKOMIS, FL 34275 US

New Principal Place of Business:

Current Mailing Address:

1310 OAK TREE LANE
NOKOMIS, FL 34275 US

New Mailing Address:

FEI Number: 65-1085435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOOTH, THOMAS
1310 OAK TREE LANE
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

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: THOMAS BOOTH

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: POWELL, CHARLES
Address: 1175 OAK TREE LANE
City-St-Zip: NOKOMIS, FL 34275

Title: STD () Delete
Name: BOOTH, THOMAS
Address: 1310 OAK TREE LANE
City-St-Zip: NOKOMIS, FL 34275

Title: VPD () Delete
Name: BAUEREISS, TIMOTHY
Address: 1205 OAK TREE LANE
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VPD (X) Change () Addition
Name: HUIE, GRADY
Address: 1275 OAK TREE LANE
City-St-Zip: NOKOMIS, FL 34275

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES POWELL

PD

12/05/2006

Electronic Signature of Signing Officer or Director

Date