## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000003380

FILED Nov 03, 2008 Secretary of State

Entity Name: HOGGETOWNE MIDDLE SCHOOL, INC.

Current Principal Place of Business: New Principal Place of Business:

3930 N.E. 15TH STREET GAINESVILLE, FL 32609

Current Mailing Address: New Mailing Address:

3930 N.E. 15TH STREET GAINESVILLE, FL 32609

FEI Number: 55-0795033 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: Name and Address of New Registered Agent:

SANTOS, KRISTINE M 3930 N.E. 15TH STREET GAINESVILLE, FL 32609 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: KRISTINE M. SANTOS

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D/P ( ) Delete Title: D/P (X) Change ( ) Addition

 Name:
 SANTOS, KRISTINE M
 Name:
 SANTOS, KRISTINE M

 Address:
 20409 NE 6TH STREET
 Address:
 1925 NW 42ND PLACE

 City-St-Zip:
 GAINESVILLE, FL 32609
 City-St-Zip:
 GAINESVILLE, FL 32605

Title: D/VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 NEWMAN, ARTHUR
 Name:

 Address:
 1802 NW 11TH PLACE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32605
 City-St-Zip:

Title: D/T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BRUNNY, RONNIE
 Name:

 Address:
 3746 SW 2ND PLACE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BYAM, GABRIELLE S
 Name:

 Address:
 1414 NW 7TH ST
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32601
 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: KRISTINE M. SANTOS D/P 11/03/2008