

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000001526

**FILED**  
**Oct 02, 2009**  
**Secretary of State**

**Entity Name:** FLORIDA PSK HOUSING, INC.

**Current Principal Place of Business:**

2740 SW 2ND AVE  
GAINESVILLE, FL 32607

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 12341  
GAINESVILLE, FL 32604

**New Mailing Address:**

1065 SW 11TH AVENUE  
GAINESVILLE, FL

**FEI Number:** 13-4254518      **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:**

COHEN, MICKAEL A PRES.  
2740 SW 2ND AVE  
GAINESVILLE, FL 32607      US

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

FELDMAN, GREGORY D PRES.  
1065 SW 11TH 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: GREGORY FELDMAN

10/02/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MR.      ( ) Delete  
Name: COHEN, MICKAEL A PRES.  
Address: PO BOX 12341  
City-St-Zip: GAINESVILLE, FL 32604

Title: MR.      (X) Delete  
Name: NEFF, JONATHAN C VP  
Address: PO BOX 12341  
City-St-Zip: GAINESVILLE, FL 32604

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MR.      (X) Change ( ) Addition  
Name: FELDMAN, GREGORY D PRES.  
Address: 1065 SW 11TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32601

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: GREGORY FELDMAN

MR.

10/02/2009

Electronic Signature of Signing Officer or Director

Date