

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000003701

**FILED**  
**Oct 30, 2006**  
**Secretary of State**

**Entity Name:** OLD COURTHOUSE SQUARE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2628 CRAWFORDVILLE HWY  
CRAWFORDVILLE, FL 32327

**New Principal Place of Business:**

31 B OLD COURTHOUSE WAY  
CRAWFORDVILLE, FL 32327 US

**Current Mailing Address:**

2628 CRAWFORDVILLE HWY  
CRAWFORDVILLE, FL 32327

**New Mailing Address:**

P.O. BOX 1645  
CRAWFORDVILLE, FL 32326 US

**FEI Number:** 20-0596136      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

EVANS, JERRY  
2628 CRAWFORDVILLE HWY  
CRAWFORDVILLE, FL 32327 US

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

LEVERING, MYRNA Y  
31 B OLD COURTHOUSE WAY  
CRAWFORDVILLE, FL 32327 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: MYRNA Y LEVERING

10/30/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: EVANS, JERRY  
Address: 2628 CRAWFORDVILLE HWY  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: VD ( ) Delete  
Name: FOERST, CHRIS  
Address: 3353 BARROW HILL TRAIL  
City-St-Zip: TALLAHASSEE, FL 32312

Title: STD ( ) Delete  
Name: REITER, AMY  
Address: 14C OLD COURTHOUSE WAY  
City-St-Zip: CRAWFORDVILLE, FL 32327

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

Title: PD (X) Change ( ) Addition  
Name: LEVERING, MYRNA  
Address: 31B OLD COURTHOUSE WAY  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: VD (X) Change ( ) Addition  
Name: GEIGER, DEBI  
Address: 30 A OLD COURTHOUSE WAY  
City-St-Zip: CRAWFORDVILLE, FL 32327

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

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: MYRNA Y LEVERING

PD

10/30/2006

Electronic Signature of Signing Officer or Director

Date