

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000006916

FILED
Jan 24, 2006
Secretary of State

Entity Name: SIERRA WOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

124 REECE PARK LANE
TALLAHASSEE, FL 32301

New Principal Place of Business:

7120 OX BOW CIRCLE
TALLAHASSEE, FL 32312

Current Mailing Address:

124 REECE PARK LANE
TALLAHASSEE, FL 32301

New Mailing Address:

7120 OX BOW CIRCLE
TALLAHASSEE, FL 32312

FEI Number: 20-0403635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, ROBERT A III
124 REECE PARK LANE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

CAMPBELL, ROBERT A III
7120 OX BOW CIRCLE
TALLAHASSEE, FL 32312 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: ROBERT A. CAMPBELL, III

01/24/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DST () Delete
Name: CAMPBELL, ROBERT A III
Address: 124 REECE PARK LANE
City-St-Zip: TALLAHASSEE, FL 32301

Title: DP () Delete
Name: CAMPBELL, PARKER S
Address: 3219 INDEPENDENCE CT
City-St-Zip: TALLAHASSEE, FL 32312

Title: DV () Delete
Name: CAMPBELL, ROBERT A JR
Address: 7120 OX BOW CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: CAMPBELL, ROBERT A III
Address: 7120 OX BOW CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

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

Title: DV (X) Change () Addition
Name: CAMPBELL, ROBERT A JR
Address: 7403 OX BOW CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

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: ROBERT A. CAMPBELL, III

DST

01/24/2006

Electronic Signature of Signing Officer or Director

Date