2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000001481

FILED Oct 13, 2008 Secretary of State

Entity Name: BLOOMFIELD HILLS OF HILLSBOROUGH HOMEOWNERS ASSOCIATION, INC.

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

10305 BLOOMFIELD HILLS DRIVE 10466 BLOOMFIELD HILLS DRIVE

SEFFNER, FL 33584 SEFFNER, FL 33584

Current Mailing Address: New Mailing Address:

P. O. BOX 367 THONOTOSASSA, FL 33584

FEI Number: 20-1929908 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MURPHY, ELLEN G
10305 BLOOMFIELD HILLS DRIVE
SEFFNER, FL 33584 US
HUGGINS, THOMAS III
10466 BLOOMFIELD HILLS DRIVE
SEFFNER, FL 33584 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: THOMAS HUGGINS III 10/13/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

in the State of Florida.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: MURPHY, ELLEN G Name: HUGGINS, THOMAS III

Address: 10305 BLOOMFIELD HILLS DRIVE Address: 10466 BLOOMFIELD HILLS DRIVE

City-St-Zip: SEFFNER, FL 33584 City-St-Zip: SEFFNER, FL 33584

Title: VPD () Delete Title: VPD (X) Change () Addition

Name: MOHAMED, DABBAGH Name: SIZLER, ALVIN D

Address: 10309 BLOOMFIELD HILLS DRIVE Address: 10108 BLOOMFIELD HILLS DRIVE

City-St-Zip: SEFFNER, FL 33584 City-St-Zip: SEFFNER, FL 33584

 $\label{eq:title:Title:TD} \textit{Title:} \qquad \textit{SD} \qquad \textit{() Delete} \qquad \qquad \textit{Title:} \qquad \textit{TD} \qquad \textit{(X) Change () Addition}$

Name: PRIDE, LISA Name: JACKSON, GREGORY

Address: 10305 BLOOMFIELD HILLS DRIVE
City-St-Zip: SEFFNER, FL 33584

Address: 10462 BLOOMFIELD HILLS DRIVE
City-St-Zip: SEFFNER, FL 33584

10462 BLOOMFIELD HILLS DRIVE
City-St-Zip: SEFFNER, FL 33584

Title: SD (X) Delete Title: () Change () Addition

Name: ORIS, STILLINGS Name:

 Address:
 10305 BLOOMFIELD HILLS DRIVE
 Address:

 City-St-Zip:
 SEFFNER, FL 33584
 City-St-Zip:

Title: TD (X) Delete Title: () Change () Addition

 Name:
 SIZLER, ALVIN D
 Name:

 Address:
 10106 BLOOMFIELD HILLS DRIVE
 Address:

 City-St-Zip:
 SEFFNER, FL 33584
 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: THOMAS HUGGINS, III PRES 10/13/2008

Electronic Signature of Signing Officer or Director

Date