

**2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Mar 09, 2011  
Secretary of State**

DOCUMENT# N04000004304

Entity Name: PLYMOUTH COMMUNITY IMPROVEMENT, INC.

**Current Principal Place of Business:**

3593 HOGSHEAD RD  
PLYMOUTH, FL 32768

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 347  
PLYMOUTH, FL 32768

**New Mailing Address:**

FEI Number: 59-2898956      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

HINES, EDDIE  
7062 HOLLY ST  
ZELLWOOD, FL 32798      US

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

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: EDDIE HINES

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HINES, EDDIE  
Address: P.O. BOX 802  
City-St-Zip: ZELLWOOD, FL 32798

Title: V  
Name: MOFFETT, S. J  
Address: 7 EAST HAMMON DR.  
City-St-Zip: APOPKA, FL 32703

Title: S  
Name: CLARK, MARCIA L  
Address: 3362 JANET ST.  
City-St-Zip: APOPKA, FL 32712

Title: C  
Name: AVERY, MINNIE L  
Address: 3300 HARRY ST.  
City-St-Zip: APOPKA, FL 32712

Title: T  
Name: MCCRARY, THOMAS  
Address: P.O. BOS 421  
City-St-Zip: PLYMOUTH, FL 32768

Title: P  
Name: BELL, GLADYS F  
Address: P.O.BOX 42  
City-St-Zip: PLYMOUTH, FL 32768

I hereby 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 all other like empowered.

SIGNATURE: GLADYS F. BELL

PARL

03/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date