

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000006325

FILED  
May 21, 2009  
Secretary of State

**Entity Name:** ROLLING HILLS PHASE THREE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5472 FIRST COAST HWY  
SUITE #13  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

269 N. CHURCHILL DRIVE  
ST. AUGUSTINE, FL 32086

**Current Mailing Address:**

5472 FIRST COAST HWY  
SUITE #13  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

269 N. CHURCHILL DRIVE  
ST. AUGUSTINE, FL 32086

**FEI Number:** 80-0115729      **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:**

SIMMONS, VANN  
5472 FIRST COAST HWY  
#13  
AMELIA ISLAND, FL 32034 US

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

HOLDEN, ARTHUR  
320 S. CHURCHILL DRIVE  
ST. AUGUSTINE, FL 32086 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: ARTHUR HOLDEN

05/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SIMMONS, VANN  
Address: 5472 FIRST COAST HWY #13  
City-St-Zip: AMELIA ISLAND, FL 32034

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: P (X) Change ( ) Addition  
Name: HIGGINS, JOHN J  
Address: 269 N. CHURCHILL DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: S ( ) Change (X) Addition  
Name: LORENTSON, JAMES E  
Address: 272 N. CHURCHILL DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: T ( ) Change (X) Addition  
Name: HOLDEN, ARTHUR  
Address: 320 S. CHURCHILL DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32086

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: JOHN J. HIGGINS

P

05/21/2009

Electronic Signature of Signing Officer or Director

Date