

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000007982

FILED
Oct 06, 2009
Secretary of State

Entity Name: FORT SOCRUM VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8250 HWY 98 N
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 283
KATHLEEN, FL 33849

New Mailing Address:

6039 CYPRESS GARDENS BLVD.
SUITE 313
WINTER HAVEN, FL 33884

FEI Number: 59-3827950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATTAGLIA, KELLY A
8738 FT. SOCRUM VILLAGE PL.
LAKELAND, FL 33810 US

Name and Address of New Registered Agent:

MEB REAL ESTATE MANAGEMENT, INC.
5609 26TH STREET WEST
BRADENTON, FL 33859 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: MARK E. BUTLER

10/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PERKINS, STEVEN
Address: 3038 FT. SOCRUM VILLAGE BLVD.
City-St-Zip: LAKELAND, FL 33810

Title: T () Delete
Name: KING, PHYLLIS
Address: 3099 FT. SOCRUM VILLAGE BLVD.
City-St-Zip: LAKELAND, FL 33810

Title: VP (X) Delete
Name: ATKINSON, ANDREW
Address: 3107 FT. SOCRUM VILLAGE BLVD.
City-St-Zip: LAKELAND, FL 33810

Title: S () Delete
Name: BATTAGLIA, KELLY
Address: 8738 FT. SOCRUM VILLAGE PL.
City-St-Zip: LAKELAND, FL 33810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
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: STEVEN PERKINS

PRES

10/06/2009

Electronic Signature of Signing Officer or Director

Date