

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

DOCUMENT# N05000012429

**FILED**  
**Feb 24, 2011**  
**Secretary of State**

**Entity Name:** LIVE OAK GOLF AND COUNTRY CLUB ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

234 NORTH SUMMIT STREET  
CRESCENT CITY, FL 32112

**New Principal Place of Business:**

**Current Mailing Address:**

234 NORTH SUMMIT STREET  
CRESCENT CITY, FL 32112

**New Mailing Address:**

**FEI Number:** 41-2197944

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ASBURY, JAY D  
234 NORTH SUMMIT STREET  
CRESENT CITY, FL 32112 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:** JAY D. ASBURY

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** CHURCH, SAMUEL B  
**Address:** PO BOX 1503  
**City-St-Zip:** JEFFERSON, NC 28640

**Title:** DS  
**Name:** CHURCH, SHIRLEY  
**Address:** PO BOX 1503  
**City-St-Zip:** JEFFERSON, NC 28640

**Title:** DVT  
**Name:** DARNELL, BARRY  
**Address:** 107 CYPRESS LANDING  
**City-St-Zip:** JACKSONVILLE, FL 32559

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:** SAMUEL B. CHURCH

DP

02/24/2011

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

\_\_\_\_\_  
Date