

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000012633

FILED  
Aug 18, 2014  
Secretary of State

**Entity Name:** STEEPLE CHASE OF WAKULLA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3520 THOMASVILLE ROAD  
4TH FLOOR  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

2 STEEPLECHASE LN  
CRAWFORDVILLE, FL 32327

**Current Mailing Address:**

PO BOX 3761  
TALLAHASSEE, FL 32315

**New Mailing Address:**

PO BOX 1161  
CRAWFORDVILLE, FL 32326

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

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

KELLY, BRIN  
33 BEELEER ROAD  
CRAWFORDVILLE, FL 32327 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: BRIN KELLY

08/18/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: KELLY, BRIN  
Address: P.O. BOX 1161  
City-St-Zip: CRAWFORDVILLE, FL 32326

Title: D  
Name: HEYS, JOHN  
Address: P.O. BOX 1161  
City-St-Zip: CRAWFORDVILLE, FL 32326

Title: D  
Name: MURDOCH, TWILA  
Address: P.O. BOX 1161  
City-St-Zip: CRAWFORDVILLE, FL 32326

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: BRIN KELLY

D

08/18/2014

Electronic Signature of Signing Officer or Director

Date