

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000003333

FILED
Dec 09, 2008
Secretary of State

Entity Name: NOBLES CROSSING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1116 HIGHWAY 17 N.
BOSTICK, FL 32007

New Principal Place of Business:

1116 HIGHWAY 17 N.
BOSTWICK, FL 32007

Current Mailing Address:

1116 HIGHWAY 17 N.
BOSTICK, FL 32007

New Mailing Address:

P. O. BOX 21
BOSTWICK, FL 32007

FEI Number: 20-2382957 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

WILLIAMS, JOHN M
1116 HIGHWAY 17 N.
BOSTICK, FL 32007 US

Name and Address of New Registered Agent:

WILLIAMS, JOHN M
1116 HIGHWAY 17 N.
BOSTWICK, FL 32007 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: JOHN M WILLIAMS

12/09/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILLIAMS, JOHN M
Address: 1116 HIGHWAY 17 N.
City-St-Zip: BOSTICK, FL 32007

Title: VD () Delete
Name: WILLIAMS, ASHLEY K
Address: 1116 HIGHWAY 17 N.
City-St-Zip: BOSTICK, FL 32007

Title: STD () Delete
Name: MULLIS, DAVID R
Address: 107 VINTAGE LANE
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILLIAMS, JOHN M
Address: 1116 HIGHWAY 17 N.
City-St-Zip: BOSTWICK, FL 32007

Title: VD (X) Change () Addition
Name: WILLIAMS, ASHLEY K
Address: 1116 HIGHWAY 17 N.
City-St-Zip: BOSTWICK, FL 32007

Title: STD (X) Change () Addition
Name: MULLIS, DAVID R
Address: 978 STATE ROAD 20
City-St-Zip: INTERLACHEN, FL 32148

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 M WILLIAMS

PD

12/09/2008

Electronic Signature of Signing Officer or Director

Date