2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 28, 2009
Secretary of State

DOCUMENT# N06000006004

Entity Name: ROBBINS HOUSING, INC.

Current Principal Place of Business:

331 S LINCOLN ST
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

331 S LINCOLN ST
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 20-4852915 **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:

ROBBINS, KENT
331 S LINCOLN ST
CRESTVIEW, FL 32536 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: CHRISTINA ROBBINS
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	ROBBINS, KENT	
Address:	658 W EDNEY AVE	
City-St-Zip:	CRESTVIEW, FL 32536	
Title:	S	(X) Delete
Name:	LOGAN, MATTIE	
Address:	1505 MARIAH WAY	
City-St-Zip:	FT. WALTON BEACH, FL 32547	
Title:	D	( ) Delete
Name:	AKINREME, OMALADE	
Address:	321 S LINCOLN ST.	
City-St-Zip:	CRESTVIEW, FL 32536	
Title:	B	( ) Delete
Name:	BOUTWELL, ROBERT	
Address:	114 THURSTON PLACE	
City-St-Zip:	CRESTVIEW, FL 32536	
Title:	B	( ) Delete
Name:	JONES, SAM	
Address:	427 SHOAL LAKE DRIVE	
City-St-Zip:	CRESTVIEW, FL 32539	
Title:	B	( ) Delete
Name:	LINTHICOME, ROSALEE L	
Address:	2108 3RD AVENUE	
City-St-Zip:	CRESTVIEW, FL 32536	

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:	
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: KENT ROBBINS EXEC 09/28/2009
Electronic Signature of Signing Officer or Director — Date