

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000011118

FILED
Sep 28, 2009
Secretary of State

Entity Name: CAVENDISH COVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4030 N MONROE ST STE M
TALLAHASSEE, FL 32303

New Principal Place of Business:

2417 FLEISCHMANN RD.
UNIT 1
TALLAHASSEE, FL 32308

Current Mailing Address:

4030 N MONROE ST STE M
TALLAHASSEE, FL 32303

New Mailing Address:

2417 FLEISCHMANN RD.
UNIT 1
TALLAHASSEE, FL 32308

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

BALDWIN, JANA
4030 N MONROE ST STE M
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

EVERGREEN COMMUNITIES, INC.
2417 FLEISCHMANN RD.
UNIT 1
TALLAHASSEE, FL 32308 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: GARY ZINS, PRES.

09/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BALDWIN, JANA L
Address: 4030 N MONROE ST STE M
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: BALDWIN, THOMAS L
Address: 4030 N MONROE ST STE M
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ZINS, GARY
Address: 2417 FLEISCHMANN RD.
City-St-Zip: TALLAHASSEE, FL 32308

Title: D (X) Change () Addition
Name: ZINS, JULIE
Address: 2417 FLEISCHMANN RD.
City-St-Zip: TALLAHASSEE, FL 32308

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: GARY ZINS

D

09/28/2009

Electronic Signature of Signing Officer or Director

Date