## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N08000003416

FILED Oct 15, 2009 Secretary of State

Entity Name: WOODS-HILL AFFORDABLE HOUSING CORPORATION

**Current Principal Place of Business: New Principal Place of Business:** 811 TEMPLE STREET 4630 S. KIRKMAN RD #113 ORLANDO, FL 32811 COCOA, FL 32922 **Current Mailing Address: New Mailing Address:** 811 TEMPLE STREET 4630 S. KIRKMAN RD #113 COCOA, FL 32922 ORLANDO, FL 32811 FEI Number: 26-2250760 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: HILL, LOIS N HILL, LOIS N 15048 SPINNAKER COVE LANE 8221 WINDSOR RIDGE RD WINTER GARDEN, FL 34787 ORLANDO, FL 32835 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: LOIS N. HILL 10/15/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition HILL. LOIS N HILL, LOIS N Name: Name: 15048 SPINNAKER COVE LANE Address: 8221 WINDSOR RIDGE RD Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: ORLANDO, FL 32835 Title: Title: ( ) Delete () Change () Addition WOODS, REGINALD L JR Name: Name: Address: 7224 HALTON CT Address: City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: Title: () Delete Title: () Change () Addition HILL, JEROME L Name: Name: 8209 WELLSMERE CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: Title: SEC ( ) Delete Title: () Change () Addition AUTRY, JOYCÉ A Name: Name: Address: P.O. BOX 1308 Address: City-St-Zip: HAWTHORNE, FL 32640 City-St-Zip: Title: Title: () Delete () Change () Addition GORDON, ETHELEENE Name: Name: 338 EDGE AVE Address: Address: City-St-Zip: VALPHRAISO, FL 32580 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.

ED/F SIGNATURE: LOIS N. HILL 10/15/2009