

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N20477

**FILED**  
**Jan 14, 2011**  
**Secretary of State**

**Entity Name:** GOLDEN LAKES OF HILLSBOROUGH COUNTY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

610 A FALCONCREST E  
PLANT CITY, FL 33565

**New Principal Place of Business:**

**Current Mailing Address:**

610 A FALCONCREST E  
PLANT CITY, FL 33565

**New Mailing Address:**

3 FALCON CREST EAST  
PLANT CITY, FL 33565

**FEI Number:** 59-2804692

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HAWLEY, JAMES D  
382 HUMMINGBIRD PL  
PLANT CITY, FL 33565 US

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

OSBORN, PHILLIP L  
3 FALCON CREST EAST  
PLANT CITY, FL 33565 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: PHILLIP L OSBORN

01/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: OSBORN, PHILLIP L  
Address: 3 FALCON CREST EAST  
City-St-Zip: PLANT CITY, FL 33565

Title: VPD  
Name: THOMPSON, BERNELL W  
Address: 392 HUMMINGBIRD PL  
City-St-Zip: PLANT CITY, FL 33565

Title: SECY  
Name: ANNEN, BARBARA  
Address: 331 FALCON CREST EAST  
City-St-Zip: PLANT CITY, FL 33565

Title: TRES  
Name: WYANT, LAURIE  
Address: 448 HERON HOLLOW  
City-St-Zip: PLANT CITY, FL 33565

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: PHILLIP L OSBORN

PRES

01/14/2011

Electronic Signature of Signing Officer or Director

Date