

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N47931

FILED  
Apr 24, 2007  
Secretary of State

**Entity Name:** HUNTERS' CROSSING P/D OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4400 NW 36TH AVE  
GAINESVILLE, FL 32606 US

**New Principal Place of Business:**

C/O ACTION REAL ESTATE SERVICES  
6110-B NW 1ST PL  
GAINESVILLE, FL 32607 US

**Current Mailing Address:**

4400 NW 36TH AVE  
GAINESVILLE, FL 32606 US

**New Mailing Address:**

C/O ACTION REAL ESTATE SERVICES  
6110-B NW 1ST PL  
GAINESVILLE, FL 32607 US

**FEI Number:** 59-3178270

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALLACE, HOWARD K  
4707 NW 53 AVE SUITE A  
GAINESVILLE, FL 32606 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: HOWARD K. WALLACE

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WALLACE, HOWARD K  
Address: 4707 NW 53RD AVE, SUITE A  
City-St-Zip: GAINESVILLE, FL 32606

Title: STD ( ) Delete  
Name: MACLEOD, DEBBIE  
Address: 4121-B NW 37TH PLACE  
City-St-Zip: GAINESVILLE, FL 32606

Title: STD ( ) Delete  
Name: CUBBAGE, GILBERT G  
Address: 10407 CENTURION PARKWAY N., STE. 108  
City-St-Zip: JACKSONVILLE, FL

Title: DVP ( ) Delete  
Name: HOBBY, SCOTT  
Address: 400 MARSH LANDING PKWY  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: HOWARD WALLACE

P

04/24/2007

Electronic Signature of Signing Officer or Director

Date