

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N48130

FILED
Oct 20, 2009
Secretary of State

Entity Name: ST. IVES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2910 KERRY FOREST PKWY D4-203
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

Current Mailing Address:

2910 KERRY FOREST PKWY D4-203
TALLAHASSEE, FL 32309 US

New Mailing Address:

FEI Number: 59-3124105 **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:

BRINKMAN, TRICIA
5322 ST IVES LANE
TALLAHASSEE, FL 32309 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: TRICIA BRINKMAN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: BRINKMAN, TRICIA
Address: 5322 ST. IVES LANE
City-St-Zip: TALLAHASSEE, FL 32308

Title: BM () Delete
Name: BURLISON, CAROL
Address: 5345 ST. IVES LANE
City-St-Zip: TALLAHASSEE, FL 32308

Title: DVP () Delete
Name: DAUGHTRY, LARK
Address: 5278 ST. IVES LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: BM () Delete
Name: EASON, DOROTHY
Address: 5351 ST IVES LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: DPT (X) Delete
Name: BARATTA, ANGELA
Address: 5288 ST IVES LANE
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: BRINKMAN, TRICIA
Address: 5322 ST. IVES LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: DP (X) Change () Addition
Name: SIGLER, SCOTT
Address: 5344 ST. IVES LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: DS (X) Change () Addition
Name: ITZIN, JEAN
Address: 5317 ST. IVES LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: DT (X) Change () Addition
Name: BARATTA, ANGELA
Address: 5288 ST IVES LANE
City-St-Zip: TALLAHASSEE, FL 32309

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: TRICIA BRINKMAN

DVP

10/20/2009

Electronic Signature of Signing Officer or Director

Date