## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N97000007167

FILED Oct 27, 2008 Secretary of State

Entity Name: PALMCREEK ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

410 SE 2ND AVENUE 2581 SE 6TH AVE

OKEECHOBEE, FL 34974 OKEECHOBEE, FL 34974

Current Mailing Address: New Mailing Address:

410 SE 2ND AVENUE P.O. BOX 1213

OKEECHOBEE, FL 34974 OKEECHOBEE, FL 34973

FEI Number: 65-1097565 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DANGREMOND, DIANE H 2581 SE 6TH AVE

OKEECHOBEE, FL 34974 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: DIANE H. DANGREMOND 10/27/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 COX, JOHN
 Name:
 BAKER, MAURICE

 Address:
 835 W. JEFFERSON ST., SUITE 109
 Address:
 129 ADAMS LANE

City-St-Zip: LOUISVILLE, KY 40202 City-St-Zip: RICHMOND, KY 40475

 Title:
 D () Delete
 Title:
 S (X) Change () Addition

 Name:
 VANZANT, ROBERT
 Name:
 WOOLEY, MARK

 Address:
 3328 BUCKNER LANE
 Address:
 760 RAINWATER DRIVE

City-St-Zip: PADUCAH, KY 42022 City-St-Zip: LEXINGTON, KY 40515

Address: 2158 WATTS DR. Address: 105-B BATTLEFIELD CIRCLE City-St-Zip: RICHMOND, KY 404759201 City-St-Zip: RICHMOND, KY 404758841

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: ROBERT E. PUCKETT P 10/27/2008