

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000002174

FILED
Nov 02, 2009
Secretary of State

Entity Name: ROYAL HILLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1635 N DALE MABRY HWY STE 11
LUTZ, FL 33548

New Principal Place of Business:

27642 CASHFORD CIRCLE STE 104
WESLEY CHAPEL, FL 33544

Current Mailing Address:

1635 N DALE MABRY HWY STE 11
LUTZ, FL 33548

New Mailing Address:

27642 CASHFORD CIRCLE STE 104
WESLEY CHAPEL, FL 33544

FEI Number: 59-3578949 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

BRADLEY, JAMES A
1635 N DALE MABRY HWY STE 11
LUTZ, FL 33548 US

Name and Address of New Registered Agent:

BRADLEY, JAMES A
27642 CASHFORD CIRCLE STE 104
LUTZ, FL 33544 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: JAMES A. BRADLEY

11/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WYNNE, CHRISTINE
Address: 401 N. PARSONS AVE SUITE 106-B
City-St-Zip: BRANDON, FL 33510

Title: VPD () Delete
Name: HEAD, ADAM
Address: 401 N. PARSONS AVE SUITE 106-B
City-St-Zip: BRANDON, FL 33510

Title: TSD () Delete
Name: BARNER, RANDALL
Address: 401 N. PARSONS AVE SUITE 106-B
City-St-Zip: BRANDON, FL 33510

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WYNNE, CHRISTINE
Address: 27642 CASHFORD CIRCLE STE 104
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: VPD (X) Change () Addition
Name: HEAD, ADAM
Address: 27642 CASHFORD CIRCLE STE 104
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: TSD (X) Change () Addition
Name: BARNER, RANDALL
Address: 27642 CASHFORD CIRCLE STE 104
City-St-Zip: WESLEY CHAPEL, FL 33544

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: CHRISTINE WYNNE

PD

11/02/2009

Electronic Signature of Signing Officer or Director

Date