

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000164183

**FILED**  
**May 27, 2007**  
**Secretary of State**

**Entity Name:** HOPE HAVEN GROUP HOME II INC.

**Current Principal Place of Business:**

3911 SE 14TH TERRACE  
GAINESVILLE, FL 32609

**New Principal Place of Business:**

**Current Mailing Address:**

3911 SE 14TH TERRACE  
GAINESVILLE, FL 32609

**New Mailing Address:**

2912 EAST WATERS AVENUE  
TAMPA, FL 33604

**FEI Number:** 20-3973177

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LARKINS, TAMMIE  
2912 EAST WATERS AVENUE  
TAMPA, FL 33604 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:** TAMMIE T LARKINS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LARKINS, TAMMIE  
Address: 3911 SE 14TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32609

Title: V ( ) Delete  
Name: LEATH, COREATHA  
Address: 3911 SE 14TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32609

Title: ST ( ) Delete  
Name: WILLIAMS, CHANDRA  
Address: 3911 SE 14TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32609

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LARKINS, TAMMIE  
Address: 2912 EAST WATERS AVENUE  
City-St-Zip: TAMPA, FL 33604

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: LARKINS, TAMMIE T  
Address: 2912 EAST WATERS AVENUE  
City-St-Zip: TAMPA, FL 33604

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** TAMMIE T LARKINS

Electronic Signature of Signing Officer or Director

P

05/27/2007

Date