

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P97000053323

**FILED**  
**Feb 25, 2011**  
**Secretary of State**

**Entity Name:** SIGNATURE PROPERTIES OF SOUTH FLORIDA INCORPORATED

**Current Principal Place of Business:**

16027 89 PLACE N  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

16027 89 PLACE N  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

**FEI Number:** 65-0760001

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TEN HOEVE, JUDITH CHERYL  
16027 89 PLACE NORTH  
LOXAHATCHEE, FL 33470 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: JUDITH CHERYL TEN HOEVE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: TENHOEVE, JUDITH C  
Address: 16027 89 PLACE NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby 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 all other like empowered.

SIGNATURE: JUDITH CHERYL TEN HOEVE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DP

02/25/2011

\_\_\_\_\_  
Date