2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# S08110

Title:

Name:

Address:

City-St-Zip:

DST

BECKER, WALT

3201 GOLFVIEW ROAD

SEBRING, FL 33875 US

() Delete

FILED Oct 02, 2008 Secretary of State

Entity Nam	IE: HARDEF	R HALL COUNTRY CLUB, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
3201 GOLF SEBRING, I	VIEW ROAD FL 33875)		
Current Mailing Address:			New Mailing Address:	
3201 GOLF SEBRING, I	VIEW ROAD FL 33875)		
FEI Number:	59-3062558	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:				
	FFORD M III I COMMERC FL 33870			
The above in the State		submits this statement for the pu	urpose of changing its registere	d office or registered agent, or both,
SIGNATUR	E: CLIFFOR	RD M. ABLES III		
	Electro	nic Signature of Registered Ager	nt	Date
		93(2)(b), F.S., the corporation did not ng Trust Fund Contribution ().	receive the prior notice.	
OFFICERS	AND DIREC	CTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	DP (HOWARD, PA 3201 GOLFVII SEBRING, FL	EW ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DVP (PHILLIPS, JOH 3201 GOLFVIE SEBRING, FL	EW ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DAST (BOGGS, KEN 3201 GOLFVII SEBRING, FL	EW ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	D (HOWARD, DE) Delete	Title: Name:	() Change () Addition

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: PAUL E. HOWARD **PRES** 10/02/2008

() Change () Addition