

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N00000004399

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** THE PADDOCKS OF MILLWOOD HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

16022 NW 10TH CIRCLE  
CITRA, FL 32113

**New Principal Place of Business:**

**Current Mailing Address:**

16022 NW 10TH CIRCLE  
CITRA, FL 32113

**New Mailing Address:**

P.O. BOX 154  
CITRA, FL 32113

**FEI Number:** 59-3721898

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREER, ROBERT  
16022 NW 10TH CIRCLE  
CITRA, FL 32113 US

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

DOMINICK, JAMES  
15995 NW 10TH CIRCLE  
CITRA, FL 32113 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 DOMINICK

01/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BODE, SUZANNE  
Address: 16351 NW 10TH COURT  
City-St-Zip: CITRA, FL 32113

Title: D  
Name: CHAMBERLIN, MARVIN  
Address: PO BOX 1102  
City-St-Zip: CITRA, FL 32113

Title: PD  
Name: DOMINICK, JAMES  
Address: 16022 NW 10TH CIR  
City-St-Zip: CITRA, FL 32113

Title: T  
Name: HAAG, DENNIS J  
Address: 15964 NW 10TH CIRCLE  
City-St-Zip: CITRA, FL 32113

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

SIGNATURE: JAMES DOMINICK

D

01/09/2012

Electronic Signature of Signing Officer or Director

Date