

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09177

FILED
Jul 31, 2008
Secretary of State

Entity Name: OAKBROOK OF GAINESVILLE ASSOCIATION, INC.

Current Principal Place of Business:

C/O MACOR REALTY, INC.
10404 SW 24TH AVE
GAINESVILLE, FL 32607 US

Current Mailing Address:

C/O MACOR REALTY, INC.
10404 SW 24TH AVE
GAINESVILLE, FL 32607 US

New Principal Place of Business:

C/O COLLEGIATE PROPERTIES, INC.
1331A SW 13TH STREET
GAINESVILLE, FL 32608 US

New Mailing Address:

C/O COLLEGIATE PROPERTIES, INC.
1331A SW 13TH STREET
GAINESVILLE, FL 32608 US

FEI Number: 59-2586600 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

MACOR REALTY, INC.
10404 SW 24TH AVE
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

COLLEGIATE PROPERTIES, INC.
1331A SW 13TH STREET
GAINESVILLE, FL 32608 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: HARRY E. SAXTON

07/31/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: KAY, LINDA
Address: 13042 FIDDLERS CREEK RD
City-St-Zip: JACKSONVILLE, FL 32224

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JADEJA, NEERAV N
Address: 1208D SW 16TH AVENUE
City-St-Zip: GAINESVILLE, FL 32601

Title: VD () Change (X) Addition
Name: BOYNTON KAYE, LILLIAN
Address: 1212C SW 16TH AVE
City-St-Zip: GAINESVILLE, FL 32601

Title: SD () Change (X) Addition
Name: PORTER, ELIZA T
Address: 1226E SW 14TH AVE
City-St-Zip: GAINESVILLE, FL 32601

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: ELIZA T. PORTER

SD

07/31/2008

Electronic Signature of Signing Officer or Director

Date