

725490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

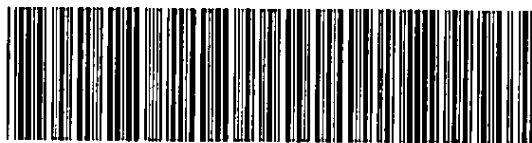
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
STATE HOUSE

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A. RAMSEY

DEC 02 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hillcrest Manor Homeowner's Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 725490

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Marilyn Winn
Name of Contact Person
Hillcrest Manor Homeowner's Association, Inc.
Firm/Company
13821 Joyce Drive
Address
Largo, FL 33774
City/State and Zip Code
mwinnfla@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marilyn Winn at (727) 686-9031
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Hillcrest Manor Homeowners Association, Inc.

2. The principal office address: 13821 Joyce Drive, Largo, FL 33774

3. The mailing address (if different): P. O. Box 64, Indian Rocks Beach, FL 33785-0064

4. Date of incorporation/qualification: _____ Document number: 725490

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Resigned Janice Kreuger
13840 Joyce Dr
Largo, FL 33774

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DEPARTMENT OF STATE
TALLAHASSEE, FL

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Marilyn Winn
13821 Joyce Drive
Largo, FL 33774
P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Marilyn Winn
Signature of an officer or director

Marilyn Winn, Secretary/Registered Agent
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Marilyn Winn
Signature of Registered Agent

October 28, 2021
Date

If signing on behalf of an entity:

Typed or Printed Name

***** FILING FEE: \$35.00 *****

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E(045 (04/13)