733801

(Requestor's Name)
(Address)
(Addays)
(Address)
(City/State/Zip/Phone #)
, , , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: BIG TREE LAKES PROPERTY OV Name of Corporation	WNERS' ASSOCIATION, INC
DOCUMENT NUMBER: 733801	
The enclosed Statement of Change of Registe	red Office/Agent and fee are submitted for filing.
Please return all correspondence concerning the	his matter to the following:
Jim Coleman	
Name of Contact Person	
Firm/Company	
5372 Custer Street	
Address	
Keystone Heights, Fl. 32656	
City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
btlpoa@yahoo.com	
E-mail address: (to be used for future annual	ual report notification)
For further information concerning this matte	r, piease call:
Jim Coleman Name of Contact Person	at (904) 509 - 9734 Area Code & Daytime Telephone Number
Name of Contact Person Enclosed is a \$35.00 check made payable to t	•
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of	the corporation: BIG TREE LAKES PROPERTY OWNERS' ASSOCIATION, INC			
2. The principal	Foffice address: 5383 LAREDO ST, KEYSTONE HEIGHTS, FL 32656			
3. The mailing	address (if different): PO Box 789, Keystone Heights, FL 32656	-		
4. Date of incor	rporation/qualification: 09 11/1975 Document number: 733801	_		
	d street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)			
	HARTMAN, MELANIE			
	7680 KINGS CANYON RD			
	KEYSTONE HEIGHTS, FL 32656			
6. The name an (if changed):	HANS C. WAHL JIMERSON BIRR, P.A. P.O. Box NOT acceptable	SECRETAR TALLAH/	2020 WOV2	T
	I INDEPENDENT DRIVE, SUITE 1400, JACKSONVILLE, FL 32258	KSS SSS) [2]
as changed wil		SF 5747	PM 1: 3	
Such change wanthorized by	ras authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	7-9	õ	
	we of ah officer or director Melanie Hartman I	R		
I hereby accep I further agree of my duties, a document is be corporation ha	of the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ving filed merely to reflect a change in the registered office address. I hereby confirm that the label of this change.	e s		
——————————————————————————————————————	gnature of Registered Agent 10/29/2020			
If signing on b	chalf 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, TALLAHASSIE, FL 32314
CR2E045 (04/43)