

755930

(Requestor's Name)

†

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

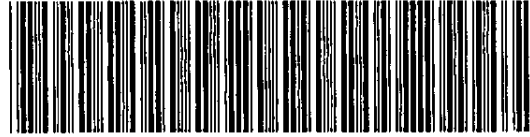
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200250750502

08/16/13--01009--008 **35.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
13 AUG 16 PM 12:27

cc 8/21

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Wexford West Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 755930

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:

Patricia L. Ferrari, Esq.
Name of Contact Person

Patricia L. Ferrari Attorney at Law
Firm/Company

19439 Shumard Oak Drive, Suite 102
Address

Land O Lakes, Florida 34638
City/State and Zip Code

ferrari.attorney@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patricia L. Ferrari, Esq. at (813) 597-8348
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Wexford West Homeowners Association, Inc.
2. The principal office address: 1011 Cortland Way, Palm Harbor, Florida 34683
3. The mailing address (if different): P.O. Box 473, Palm Harbor, Florida 34682
4. Date of incorporation/qualification: 01/16/1981 Document number: 755930
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

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

Patricia L. Ferrari, Esq.
19439 Shumard Oak Drive, Suite 102
Land O Lakes, Florida, 34638

P.O. Box NOT acceptable

13 AUG 16 PM 12: 27

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

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.

Signature of an officer or director: Carl R. Olson

Printed or typed name and title: Carl R. Olson, Director/Treasurer

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.

Signature of Registered Agent: Patricia L. Ferrari

Date: 06/27/2013

If signing on behalf of an entity:

Typed or Printed Name: CARL R. OLSON

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