

N04 000 000 728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

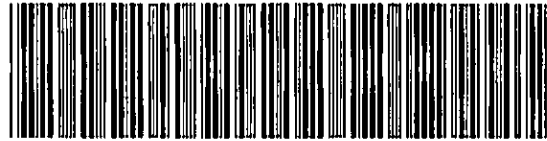
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STATE FEE  
APR 09 2021

2021 APR 17 PM 10:55

FLAESH



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 4, 2021

JAN MCCLANAHAN  
13350 W COLONIAL DRIVE STE 330  
WINTER GARDEN, FL 34787

SUBJECT: DEERFIELD PLACE HOMEOWNERS ASSOCIATION, INC.  
Ref. Number: N04000000728

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

THE NAME OF THE NEW REGISTERED AGENT SHOULD BE SPELLED OUT AS IT APPEARS ON OUR WEBSITE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 521A00004678

2021 MAR 17 PM 5:32

RECEIVED

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DEERFIELD PLACE HOMEOWNERS ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** N0400000728

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:

Jan McClanahan

Name of Contact Person

Southwest Property Management of Central FL Inc.

Firm/Company

13350 W Colonial Drive Ste 330

Address

Winter Garden, FL 34787

City/State and Zip Code

jan@swpmcfl.com

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

For further information concerning this matter, please call:

Jan McClanahan

Name of Contact Person

at ( 407 ) 656-1081

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

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**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: DEERFIELD PLACE HOMEOWNERS ASSOCIATION INC.
- 2. The principal office address: c/o Southwest Property Management of Central FL Inc.  
13350 W Colonial Drive Ste 330 Winter Garden, FL 34778
- 3. The mailing address (if different): P. O. Box 783367 Winter Garden, FL 34778
- 4. Date of incorporation/qualification: 01/21/2004 Document number: N04000000728
- 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)

Sentry Management Inc.

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2180 West SR 434 Ste 5000

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Longwood, FL 32779

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

c/o Southwest Property Management of Cntrl FL, Inc.

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13350 W Colonial Drive Ste 330

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Winter Garden, FL 34787

P.O. Box NOT acceptable

2001 MAR 17 PM 10:55

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

Richard S. Smith, President  
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.*

  
Signature of Registered Agent

1/11/01  
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  
CR2E045 (04/13)