

NO 80000010855

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DIVISION OF CORPORATIONS
11 MAR -4 PM 1:10

Amend
cc/cus
@ 3/4/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Maple Corner Homeowner's Association, Inc.

DOCUMENT NUMBER: N08000010855

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Schlitter
(Name of Contact Person)

Maple Corner Homeowner's Association, Inc.
(Firm/ Company)

PO Box 632
(Address)

LaBelle, Florida ,33975
(City/ State and Zip Code)

GLOTWP16@Yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Schlitter at (863) 675-6081
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2011

JOHN SCHLITTER
MAPLE CORNER HOMEOWNERS
P.O. BOX 632
LABELLE, FL 33975

SUBJECT: MAPLE CORNER HOMEOWNERS' ASSOCIATION, INC.
Ref. Number: N08000010855

We have received your document for MAPLE CORNER HOMEOWNERS' ASSOCIATION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 811A00004356

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAR -4 PM 1:10

Articles of Amendment
to
Articles of Incorporation
of

Maple Corner Homeowner's Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N08000010855

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

John Schlitter, President

347 BottleBrush Ave., SW

LaBelle, Florida, 33935

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

John Schlitter, President

PO Box 632

LaBelle, Florida, 33975

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

John Schlitter

New Registered Office Address:

~~PO Box 632~~ 347 BOTTLEBRUSH AVE. SW
(Florida street address)

LaBelle

(City)

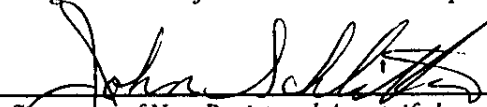
Florida 33975

(Zip Code)

33935

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	Fidanza, Nicholas S.	224 Oak St. SW LaBelle, Florida, 33935	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	Kuehne, Charles	232 Oak St. SW LaBelle, Florida, 33935	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
S	Kraft, Carol	223 Oak ST. SW LaBelle, Florida, 33935	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Directors Being Added:

P	John Schlitter	347 BottleBrush Ave. SW LaBelle, Florida, 33935
VP	Galen Brookens	234 Oak St. SW LaBelle, Florida, 33935
VP	Wallace Nickell	479 Maple Dr. SW LaBelle, Florida, 33935
S	M. Lynne Soulliere	337 BottleBrush Ave. SW LaBelle, Florida, 33935
T	Dan Culligan	228 Oak St. SW LaBelle, Florida, 33935

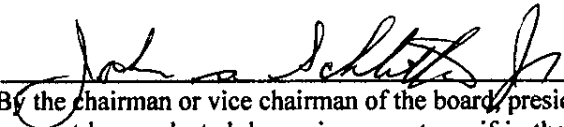
The date of each amendment(s) adoption: 01/12/2011
(date of adoption is required)

Effective date if applicable: 01/12/2011
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 02/16/2011

Signature 
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JOHN A. SCHLITZER JR
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)