

N/1300000 9348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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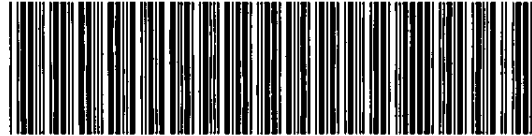
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JAN 16 PM 1:00

JAN 21 2015

T. CARTER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: People of Lockhart Community Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N13000009348

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:

Regina Melvin

Name of Contact Person

People of Lockhart Community Association

Firm/Company

P.O. Box 608383

Address

Orlando, FL 32806-8383

City/State and Zip Code

president@peopleoflockhart.org

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

For further information concerning this matter, please call:

Greg Mellowe

Name of Contact Person

at 407 782-6983

Area Code & Daytime Telephone Number

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

Thank you!

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

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.

2. The principal office address: 4740 Halliday Lane, Orlando, FL 32810

3. The mailing address (if different): P.O. Box 608383, Orlando, FL 32860-8383

4. Date of incorporation/qualification: **10/15/2013** Document number: **N13000009348**

Gregory A Jackson (Resigned)

8292 BAYWOOD VISTA DRIVE

ORLANDO, FL 32810

Regina Melvin

4740 HALLIDAY LANE

P.O. Box NOT acceptable

ORLANDO, FL 32810

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.

D. M. Mellowe
Signature of an officer or director

Greg Mellowe, Director
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

12/21/14

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 (03/12)

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