

N13257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

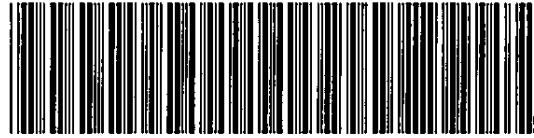
(Document Number)

Certified Copies _____

Certificates of Status _____

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05/24/07--01041--012 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 MAY 24 AM 8:28

FILED

APR
5/31/07

LAW OFFICES OF
RICHARD H. WILSON, P.A.
ATTORNEYS AND COUNSELORS AT LAW

215 VERNE STREET
POST OFFICE BOX 709
TAMPA, FLORIDA 33601

TELEPHONE
(813) 253-2555

FAX
(813) 251-4557

E-MAIL
RichardWilson@rhw-law.com

RICHARD H. WILSON
MARIELLE E. WESTERMAN

May 21, 2007

Florida Department of State
Amendment Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: Countryway Homeowners Association, Inc.

Gentlemen:

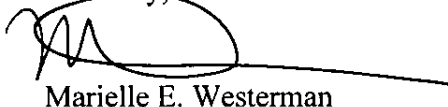
Enclosed please find the following:

1. Cover Letter to the Amendment Section, Division of Corporations
2. Statement of Change of Registered Office or Registered Agent
3. Our firm's check in the amount of \$35.00

Please process the Statement of Change at your earliest convenience and return all correspondence regarding this matter to the undersigned.

If you have any questions or if I can be of any further service, please do not hesitate to contact me.

Sincerely,



Marielle E. Westerman

MEW:pjs
Enclosures

cc: Mr. James Kinnard
Ms. Jennifer Pearson

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Countryway Homeowners Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N13257

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:

Marielle E. Westerman, Esquire
(Name of Contact Person)

Richard H. Wilson, P.A.
(Firm/Company)

215 Verne Street, Suite A
(Address)

Tampa, FL 33606
(City/State and Zip Code)

For further information concerning this matter, please call:

Marielle E. Westerman, Esquire at (813) 253-2555
(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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Countryway Homeowners Association, Inc.
2. The principal office address: 7001 Temple Terrace Highway
Temple Terrace, FL 33637
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/4/1991 Document number: N13257

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Steven P. Mezer
220 South Franklin Street
Tampa, FL 33602

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

Marielle E. Westerman, Esquire
215 Verne Street, Suite A
(P.O. Box NOT acceptable)
Tampa, FL 33606

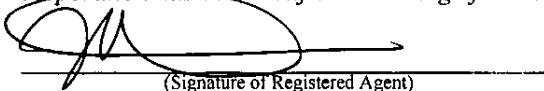
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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)

James Kannard, 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)

5/21/07
(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 (8/05)

FILED
2007 MAY 24 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA