

N 14066600SSS

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

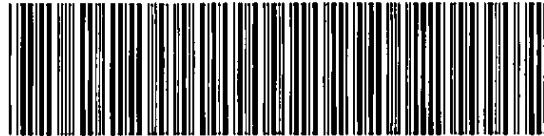
(Document Number)

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06/20/18--01004--017 **35.00

10 JUN 20 PM 12:26

JUL 12 2018
T. LEMUEUX

FILED
2018 JUL 12 AM 8:39
CLERK OF SUPERIOR COURT
JUL 12 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Heritage Hills SR-59 Homeowners Assoc.

DOCUMENT NUMBER: 11/4 00000888

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

Please return all correspondence concerning this matter to the following:

Scott Bean

(Name of Contact Person)

344 Legacy Way

(Address)

Mantoloking, FL 32544

(City/ State and Zip Code)

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

For further information concerning this matter, please call:

(Name of Contact Person)

at

(Area Code)

(Daytime Telephone Number)

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

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

June 21, 2018

SCOTT BEAN
344 LEGACY WAY
MONTICELLO, FL 32344

SUBJECT: HERITAGE HILLS SR-59 HOMEOWNERS ASSOCIATION, INC.
Ref. Number: N14000000888

We have received your document for HERITAGE HILLS SR-59 HOMEOWNERS ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE PRINTOUT WHICH WAS INCLUDED SHOWS THE CURRENT OFFICER/DIRECTORS NOW ON FILE WITH THIS OFFICE. YOU MUST LIST THEM ON PAGE 2 OF 4 WITH ACTION TYPE "REMOVE" AND THE NEW OFFICERS SHOULD BE LISTED AS ACTION TYPE "ADD". PLEASE REVISE THIS PAGE AND RESUBMIT.

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: 518A00012936

18 JUL 12 AM 8:25

Articles of Amendment
to
Articles of Incorporation
of

Heritage Hills 9K-59 Homeowners Association

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

N 1400000 888

(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)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Scott Beair

344 Legacy Way

(Florida street address)

New Registered Office Address:

Monticello

(City)

Florida

32344

(Zip Code)

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]

Signature of New Registered Agent, if changing

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Heritage Hills SR-59 Homeowners Assn.

DOCUMENT NUMBER: 114 00000888

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

Please return all correspondence concerning this matter to the following:

Scott Bean

(Name of Contact Person)

344 Legacy Way

(Address)

Mentmore, FL 32544

(City/ State and Zip Code)

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

For further information concerning this matter, please call:

_____ at _____
(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:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
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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

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action
(Check One)

Title

Name

Address

- 1) ☐ Change
☒ Add
☐ Remove
President John D. Coates 527 Tradition Way
Mandeville, FL 32344
- 2) ☐ Change
☒ Add
☐ Remove
Vice Pres Scott Brann 344 Legacy Way
Mandeville, FL 32344
- 3) ☐ Change
☒ Add
☐ Remove
Treasurer Jan Burroughs 1016 Lerby Pt
Tallahassee, FL 32314
- 4) ☐ Change
☒ Add
☐ Remove
At Large Greg Walker 101 Heritage Blvd
Mandeville, FL 32344
- 5) ☐ Change
☐ Add
☒ Remove
D Edward D. Caraway 3320 Thomas Rd
Tallahassee, FL 32308
- 6) ☐ Change
☐ Add
☒ Remove
D Drew Whitaker Jr. 3320 Thomas Rd
Tallahassee, FL 32308

S. M. J. A.

7) ~~X~~ Remove D. Jerry Bartwright

3320 Thomasville Rd
Tallahassee, FL 32308

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

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

The date of each amendment(s) adoption: 6/20/18, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 6/20/18

Signature [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)

Scott Bean
(Typed or printed name of person signing)

Vice President
(Title of person signing)