

NR106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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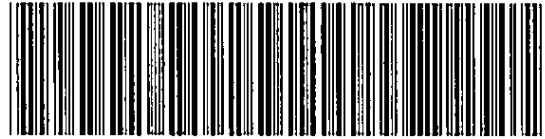
(Business Entity Name)

(Document Number)

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AUG 14 2017  
S. YOUNG

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MICHIGAN SECRETARY OF STATE

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Colonnades Property Owners Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N19106

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:

Craig B. Hill, Esquire  
Name of Contact Person

Law Office of Craig B. Hill, P.L.  
Firm/Company

50 Lake Morton Drive  
Address

Lakeland, FL 33801  
City/State and Zip Code

cbhill@chill-law.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Catherine Gangloff at ( 863 ) 937-9381  
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 FL \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Colonnades Property Owners Association, Inc.
2. The principal office address: 4800 Colonnades Club Boulevard Lakeland, FL 33811
3. The mailing address (if different):
4. Date of incorporation/qualification: 2/5/1987 Document number: N19106

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)

Craig B. Hill, Esquire
625 E. Lime Street, Suite 5
Lakeland, FL 33801

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

Craig B. Hill, Esquire
50 Lake Morton Drive
Lakeland, FL 33801
P.O. Box NOT acceptable

17 NOV - 7 11 51 AM
TALLAHASSEE, FLORIDA

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.

Deborah Burton
Signature of an officer or director

Deborah Burton Vice 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.

CB Hill
Signature of Registered Agent

8/4/17
Date

If signing on behalf of an entity:

Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*