

N20646

 Schrepferman
1863 N.W. 45th Terrace
Ocala, FL 34482

City/State/Zip

Phone #

FILED
00 JAN -6 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Popplewood Farms Residents, Inc.
(Corporation Name) (Document #)

200003059432--7
-12/02/99--01090--013

2. _____
(Corporation Name) (Document #)

*****35.00 *****35.00

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

RA Chg.

V. SHEPARD JAN 11 2000

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

December 10, 1999

SCHREPFERMAN
1863 NW 45TH TERRACE
OCALA, FL 34482

SUBJECT: FOXWOOD FARMS RESIDENTS, INC.
Ref. Number: N20646

We have received your document for FOXWOOD FARMS RESIDENTS, 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):

Section 607.1622(7) or 617.1622(7), Florida Statutes, provides that a corporation may file an additional updated annual report. The enclosed annual report form can be used for designating the current names and addresses of the officers, directors and/or registered agent of the corporation. Please note the applicable filing fee is \$61.25.

There is a balance due of \$26.25.

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) 487-6909.

6050
Velma Shepard
Corporate Specialist

Letter Number: 499A00058339

Rec'd 1/6

florians

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: FOXWOOD FARMS RESIDENTS, INC.
2. The mailing address of the corporation is: Diane White, 1940 NW 47th Terr,
Ocala, FL 34482
3. Date of incorporation/qualification: May 1987 Document number: N20646
4. The name and address of the current registered agent and office:

Diane White
1940 N.W. 47th Terrace
Ocala, FL 34482

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Robert Schrepferman
1863 N.W. 45th Terrace
Ocala, FL 34482

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.

George H. Shaffer
(Signature of an officer, chairman or vice chairman of the board)

1/4/2000
(Date)

GEORGE H. SHAFFER
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Robert S. Schrepferman
(Signature of Registered Agent)

1/4/2000
(Date)

If signing on behalf of an entity

(Typed or Printed Name)

(Capacity)

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

Paid