

N34631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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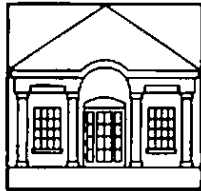
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NOV 29 2017
C. McNAIR

Charles R. Chilton †
Robert J. Stumbaugh †
Robert C. Chilton †
Krista Mahalak †

† A1st Rated by Martindale-Hubbell

www.winterhavenlaw.com



**Sharit,
Bunn &
Chilton P.A.**
ATTORNEYS AT LAW

99 Sixth Street, S.W.
Winter Haven, FL 33880-7900
Telephone: (863) 293-5000
Fax: (863) 293-2091

Reply to:
P.O. Box 9498
Winter Haven, FL 33883-9498

November 22, 2017

Via US regular mail

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

Re: Berry Hill Homeowners Association, Inc.
Change of Registered Agent

Dear Sir/Madam:

I hope this finds you well. Enclosed please find the completed *Statement of Change of Registered Office or Agent or Both for Corporations* form. Also enclosed is my firm's check for \$35.00 to cover the filing fee. If you have any questions, do not hesitate to contact me.

Very truly yours,


ROBERT C. CHILTON

Enclosures (as stated)
cc: Client (via email)

RECEIVED
NOV 27 PM 2:00

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Berry Hill Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N34631

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:

Robert C. Chilton, Esq.

Name of Contact Person

Sharit, Bunn & Chilton, P.A.

Firm/Company

P.O. Box 4498

Address

Winter Haven, FL 33883-9498

City/State and Zip Code

RobertChilton@winterhavenlaw.com

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

For further information concerning this matter, please call:

Robert C Chilton

Name of Contact Person

at (863) 293-5000

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: BERRY HILL HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: 322 4th Street NW
WINTER HAVEN FL 33881
3. The mailing address (if different): P.O. Box 7011
WINTER HAVEN, FL 33883
4. Date of incorporation/qualification: _____ Document number: N34631
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)

Robert A Putnam
500 S. Florida Avenue Suite 300
Lakeland FL 33880

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

Robert C. Chilton Esq.
99 South Street SW
P.O. Box NOT acceptable
Winter Haven, FL 33880 - 7900

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.

Marilyn Lynch
Signature of an officer or director

MARILYN LYNCH Sec/Treas.
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]
Signature of Registered Agent

November 21, 2017
Date

If signing on behalf of an entity:

Robert C. Chilton
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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