

N94000 000 428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

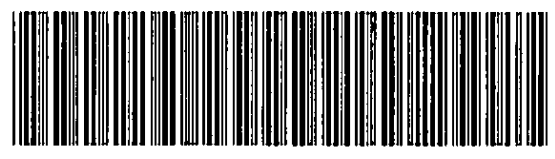
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Weatherly Condominiums  
Name of Corporation

**DOCUMENT NUMBER:** N94000000428

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:

Haydee Hernandez  
Name of Contact Person

Weatherly Condominiums  
Firm/Company

1649 1/2 W Oak Ridge Rd.  
Address

Orlando FL 32809  
City/State and Zip Code

E-mail address: (to be used for future annual report notification) whor1649@gmail.com

For further information concerning this matter, please call:

Haydee Hernandez at (407) 851-0171  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State. > Has been paid on line, By Feb. 6, 2020

**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



*Mailed Out 2/6/2020*

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 11, 2020

HAYDEE HERNANDEZ  
1649 1/2 W. OAK RIDGE ROAD  
ORLANDO, FL 32809

SUBJECT: THE WEATHERLY CONDOMINIUMS AT CENTRAL PARK  
ASSOCIATION, INC.  
Ref. Number: N94000000428.

2020 MAR 20 PM 1:23

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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.

Claretha Golden  
Regulatory Specialist II

Letter Number: 820A00000803

*Attach w the document with the new register agent*

*3/17/2020 Register Corporation Form corrected as per requested.*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 11, 2020

ZAIDE LABOY  
1649 1/2 W OAK RIDGE ROAD  
ORLANDO, FL 32809

SUBJECT: THE WEATHERLY CONDOMINIUMS AT CENTRAL PARK  
ASSOCIATION, INC.  
Ref. Number: N94000000428

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

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.

Claretha Golden  
Regulatory Specialist II

Letter Number: 420A00003091

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.

THE WEATHERLY CONDOMINIUMS AT CENTRAL PARK ASSOCIATION, INC.

- 1. The name of the corporation: \_\_\_\_\_
- 2. The principal office address: 1649 1/2 W. Oak Ridge Rd.  
Orlando, FL 32809-3960
- 3. The mailing address (if different): Same as above
- 4. Date of incorporation/qualification: 1/19/1994 Document number: N94000000428
- 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)

Haydee Hernandez  
1649 1/2 W. Oak Ridge Rd.  
Orlando, FL 32809

2020 FEB 20 AM 7:25

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

Zaide Labay  
1649 1/2 W. Oak Ridge Rd.  
Orlando, FL 32809

P.O. Box Not Acceptable

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.

Haydee Hernandez  
Signature of an officer or director

Haydee Hernandez 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.

Zaide Labay  
Signature of Registered Agent

February 5, 2020  
Date

If signing on behalf of an entity:

Zaide Labay  
Typed or Printed Name

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