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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Colonial Coach Mobile Homeowners
ASSOCIATION, INC

DOCUMENT NUMBER: N98000003100

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

Please return all correspondence concerning this matter to the following:

Rita Hammond or Deborah Bovard
(Name of Contact Person)

Colonial Coach Mobile Homeowners
ASSOCIATION, INC (Firm/ Company)

138 Shore Parkway
(Address)

Tampa Florida 33615
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Rita Hammond or Deb Bovard at (813) 885-1644
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$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
409 E. Gaines Street
Tallahassee, FL 32399

The date of adoption of the amendment(s) was: June 12, 2005

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

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signed this 12 day of June, 2005.

Signature Rita Hammond, Treasurer
(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.)

Rita Hammond
(Typed or printed name of person signing)

Treasurer
(Title of person signing)

FILING FEE: \$35