

NO10000000246

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400265414624

10/16/14--01016--012 \*\*35.00

14 OCT 16 PM 1:51  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

C. Lewis  
10-27-14

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** WOODLAND LAKES HOMEOWNER'S ASSOCIATION OF LAKE ALFRED, INC.

Name of Corporation

**DOCUMENT NUMBER:** N01000000246

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:

**IRIS F. WALKER**

Name of Contact Person

**LEE JAY COLLING & ASSOC PA**

Firm/Company

**529 VERSAILLES DRIVE, S/103**

Address

**MAITLAND, FL 32751**

City/State and Zip Code

**leejaycolling@email.com**

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

For further information concerning this matter, please call:

**Iris F. Walker**

Name of Contact Person

at **407 834-7500**

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: WOODLAND LAKES HOMEOWNER'S ASSOCIATION OF LAKE ALFRED, INC.  
2. The principal office address: 1901 US HWY 17-92, LOT 177, LAKE ALFRED, FL 33850

3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 12/22/00 Document number: N01000000246

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 T. TERENCE

1917 BOOTH CIR., SUITE 171

LONGWOOD, FL 32750

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

LEE JAY COLLING & ASSOC., P.A.

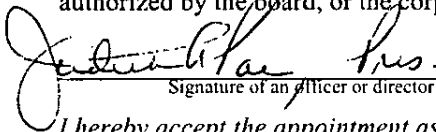
529 VERSAILLES DRIVE, S/103

P.O. Box NOT acceptable

MAITLAND, FL 32751

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

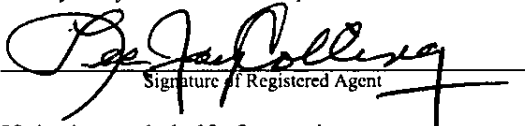
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

JUDITH A. POE, 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.*

  
Signature of Registered Agent

OCTOBER 13, 2014

Date

If signing on behalf of an entity:

LEE JAY COLLING & ASSOC., PA

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)

14 OCT 16 PM 1:51  
DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE