## 729387

(Re	questor's Name)	
(Ad	dress)	
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(City/State/Zip/Phone #)		
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PICK-UP	MAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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04/17/15--01019--012 \*\*35.00



4/22/15

## **COVER LETTER**

TO:	Amendment Section Division of Corporations		
SUBJ	The Wekiva Hunt Club Community As		nc.
	Name of Corpo	oration	
DOCU	729387 UMENT NUMBER:		
The er	nclosed Statement of Change of Registered Office/A	gent and fee	are submitted for filing.
Please	e return all correspondence concerning this matter to	the following	<b>z</b> :
	Robert Taylor		
	Name of Contac	t Person	<u>.                                    </u>
	Becker & Poliakoff		
	Firm/Comp	any	
	111 N. Orange Ave. Suite 1400		
	Address	3	
	Orlando, FL 32801		
	City/State and 2	Zip Code	<del></del>
	E-mail address: (to be used for futu	re annual re	port notification)
For fu	urther information concerning this matter, please call	:	
Rob	ert Taylor	<b>407</b>	875-0955 ) e & Daytime Telephone Number
	Name of Contact Person	Area Cod	e & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the Departme	ent of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amer Divis Clifto 2661	Address: Idment Section Idment Corporations In Building Executive Center Circle In Sassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Florida
	the corporation: The Wekiva Hunt Club Community Association, Inc.
	office address: 197 N. Hunt Club d, FL 32779
3. The mailing a	address (if different):
4. Date of incor	poration/qualification; 4/18/1974 Document number: 729387
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Taylor & Carls, P.A.
	150 N. Westmonte Drive
	Altamonte Springs, FL 32714
6. The name and (if changed):	Altamonte Springs, FL 32714  d street address of the new registered agent (if changed) and /or registered office  Becker & Poliakoff P.A.
	Becker & Poliakoff P.A.
	111 N. Orange Ave. Suite 1400
	P.O. Box NOT acceptable Orlando, FL 32801
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change we authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Charles	CHARLES R. NESS PRESIDENT
	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duites, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
M.	nature of Rogistered Agent Date
_	half of an entity:
Robert Taylo	or, Shareholder
T	yped 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)