

N03000009994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

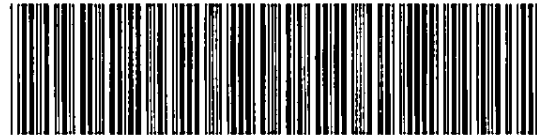
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
MAY 24 AM 10 46

MAY 29 2018
J. MCNAIR

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LAKE WILSON PRESERVE HOME OWNERS ASSOCIATION A NOT FOR PROFIT CORPORATION
Name of Corporation

DOCUMENT NUMBER: N03000009994

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:

APRIL ASHFORD

Name of Contact Person

LAKE WILSON PRESERVE HOA

Firm/Company

179 BOREALIS CRESCENT

Address

OTTAWA, ONTARIO, CANADA, K1K 4V1

City/State and Zip Code

INFO@LAKEWILSONPRESERVEHOA.COM

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

For further information concerning this matter, please call:

APRIL ASHFORD

Name of Contact Person

at (**613**) **3273936**

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

RECEIVED
DIVISION OF CORPORATIONS
MAY 24 AM 10

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: LAKE WILSON PRESERVE HOME OWNERS ASSOCIATION A NOT FOR PROFIT CORPORATION
2. The principal office address: C/O BAYLIS & COMPANY PA
53 LAKE MORTON DRIVE, LAKE LAND, FLORIDA 33801
3. The mailing address (if different): SAME AS ABOVE

4. Date of incorporation/qualification: 11/17/2003 Document number: N03000009994

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)

SENTRY MANAGEMENT INC

2180 WEST SR 434 STE 5000

LONGWOOD, FLORIDA 32779

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

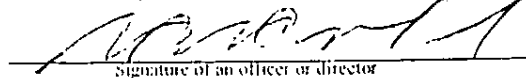
BAYLIS & COMPANY PA

53 LAKE MORTON DRIVE, LAKE LAND, FLORIDA 33801

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.


Signature of an officer or director

APRIL ASHFORD, 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

MAY 15/2018

Date

If signing on behalf of an entity:

Baylis & Company PA, CPA's
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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
MAY 16 2018