

N05720

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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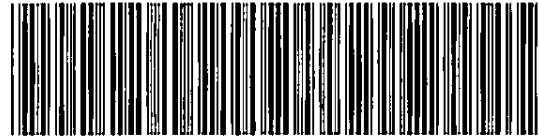
(Business Entity Name)

(Document Number)

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JUL 16 2021

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Davis Islands Garden Club

DOCUMENT NUMBER: 005720

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

Please return all correspondence concerning this matter to the following:

Sandra Heiken  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/ Company)

81 Columbia Drive  
(Address)

Tampa, FL 33606  
(City/ State and Zip Code)

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

For further information concerning this matter, please call:

Sandra Heiken at (919) 345-6293  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

Davis Islands Garden Club  
(Name of Corporation as currently filed with the Florida Dept. of State)

005720  
(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

\_\_\_\_\_ The new  
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."  
"Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the  
new registered agent and/or the new registered office address:

Name of New Registered Agent: Sandra Heiken  
81 Columbia Drive  
(Florida street address)

New Registered Office Address:  
Tampa, Florida 33606  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Sandra Heiken  
Signature of New Registered Agent, if changing

21 JUN 19 10 06 AM  
2017

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
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- |  |                                |                          |  |
|--|--------------------------------|--------------------------|--|
| 1) <input checked="" type="checkbox"/> Change<br><input type="checkbox"/> Add<br><br><input type="checkbox"/> Remove   | <u>P</u>                       | <u>Sandra Heiken</u>     | <u>450 W Davis Blvd,</u><br><u>Tampa, FL 33606</u>       |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add   | <u>P</u>                       | <u>Marie Nazareth</u>    | <u>12 Bahama Circle</u><br><u>Tampa, FL 33606</u>        |
| 3) <input checked="" type="checkbox"/> Remove<br><input checked="" type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>1st VP</u>                  | <u>Michelle James</u>    | <u>450 Severn Ave</u><br><u>Tampa, FL 33606</u>          |
| 4) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><br><input type="checkbox"/> Remove   | <u>2nd VP</u>                  | <u>Patricia Capitaro</u> | <u>10411 Newport Cir.</u><br><u>Tampa, FL 33612</u>      |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><br><input checked="" type="checkbox"/> Remove   | <u>Parliamentarian</u>         | <u>Shari Spencer</u>     | <u>17930 Spencer Rd.</u><br><u>Odessa, FL 33556-4924</u> |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><br><input checked="" type="checkbox"/> Remove   | <u>Corresponding Secretary</u> | <u>Janet Dato</u>        | <u>136 Baltic Circle</u><br><u>Tampa, FL 33606</u>       |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
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- |  |                                |                         |  |
|--|--------------------------------|-------------------------|--|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>T</u>                       | <u>Margaret Lupz</u>    | <u>165 Baltic Circle</u><br><u>Tampa, FL 33606</u>         |
| 2) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>Parliamentarian</u>         | <u>Connie Utso</u>      | <u>16311 Shagbark Pl</u><br><u>Tampa, FL 33618</u>         |
| 3) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>Corresponding Secretary</u> | <u>Carol Dunn</u>       | <u>869 South Davis Blvd.</u><br><u>Tampa, FL 33606</u>     |
| 4) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>T</u>                       | <u>Louise Neuburger</u> | <u>215 W. Grand Central Ave.</u><br><u>Tampa, FL 33606</u> |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | _____                          | _____                   | _____  |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | _____                          | _____                   | _____  |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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The date of each amendment(s) adoption: April 7, 2021, if other than the date this document was signed.

Effective date if applicable: April 7, 2021  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

### Adoption of Amendment(s)

**(CHECK ONE)**

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 6/15/21

Signature Sandra Heiken  
(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)

SANDRA HEIKEN  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)