

718169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

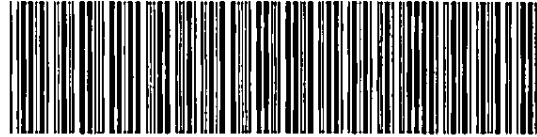
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL -5 AM 11:28

JUL 17 2019
C. J. ...

COVER LETTER

TO: Amendment Section
Division of Corporations

FILED
2007 JUL -5 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: CARRIAGE HILL COMMUNITY ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: 718169

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:

ED BAKALLA

Name of Contact Person

Firm/Company

560 Marigold

Address

Casselberry, FL 32707

City/State and Zip Code

ebakalla@gmail.com

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

For further information concerning this matter, please call:

Ed Bakalla

Name of Contact Person

at (407) 721-0841

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: Carriage Hill Community Association, Inc.
2. The principal office address: 560 Marigold Road, Casselberry FL 32718
3. The mailing address (if different): P.O. Box 180111 Casselberry, FL 32718
4. Date of incorporation/qualification: 04/08/1970 Document number: 718169
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)

Ed Bakalla

6 Bayberry Branch

Casselberry, FL 32707

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

Ed Bakalla

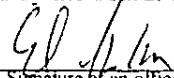
560 Marigold Road

P.O. Box NOT acceptable

Casselberry, FL 32707

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.

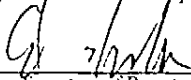


Signature of an officer or director

Ed Bakalla, Treasurer

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

7/1/2019

Date

If signing on behalf of an entity:

Ed Bakalla

Typed or Printed Name

*** FILING FEE: \$35.00 ***