

726 464

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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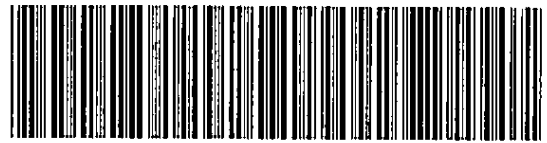
(Business Entity Name)

(Document Number)

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STATE OF TEXAS  
SECRETARY OF STATE

2019 MAY -6 PM 12:20

FILED

MAY 15 2019  
T. LEMMON

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Loch Harbour Association Inc.

Name of Corporation

**DOCUMENT NUMBER:** 726464

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:

**Louis J. Gahr**

Name of Contact Person

**Vine Management of Ocala**

Firm/Company

**4406 SE 32nd Place**

Address

**Ocala FL 34480**

City/State and Zip Code

**info@VineManagementofOcala.com**

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

For further information concerning this matter, please call:

**Louis J. Gahr**

Name of Contact Person

**352 812-8086**

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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Loch Harbour Association Inc.
- 2. The principal office address: 4406 SE 32nd Place  
Ocala FL 34480
- 3. The mailing address (if different): PO Box 3305  
Bellevue FL 34421
- 4. Date of incorporation/qualification: 5/21/73 Document number: 726464

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 SUITE 5000  
Longwood, FL 32779

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

Vine Management of Ocala, LLC  
4406 SE 32nd Place  
P.O. Box NOT acceptable  
Ocala FL 34480


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TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

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.

x  Signature of an officer or director      Lori Pressley, Board 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      5/1/2019 Date

If signing on behalf of an entity:  
Vine Management of Ocala, LLC  
Typed or Printed Name

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