

726473

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

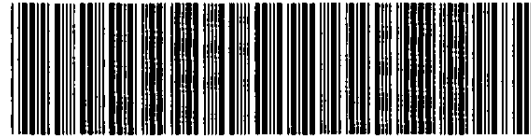
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B.A.

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ponce De Leon Towers, Inc.
Name of Corporation

DOCUMENT NUMBER: 726473

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:

Vicki Diaz
Name of Contact Person

World of Homes
Firm/Company

2884 S. Osceola Avenue
Address

Orlando, FL 32806
City/State and Zip Code

vicki@WorldofHomes.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vicki Diaz at (407) 770-1748 ext 209
Name of Contact Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2010

VICKI DIAZ
WORLD OF HOMES
2884 S OSCEOLA AVE
ORLANDO, FL 32806

SUBJECT: PONCE DE LEON TOWERS, INC.
Ref. Number: 726473

We have received your document for PONCE DE LEON TOWERS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 610A00018227

**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: Ponce De Leon Towers, Inc.
2. The principal office address: 3501 S. Atlantic Avenue, New Smyrna Beach, FL 32128
3. The mailing address (if different): Ponce De Leon Towers, Inc.
c/o World of Homes, 2884 S. Osceola Avenue, Orlando, FL 32806
4. Date of incorporation/qualification: 5-22-1973 Document number: 726473
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)

Hauge, Darlene F.
1740 Weeping Elm Circle
Port Orange, FL 32128

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

Vicki Diaz
2884 S. Osceola Avenue
Orlando, FL 32806

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.

Darlene F. Hauge
Signature of an officer or director

Darlene Hauge
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.

Vicki Diaz
Signature of Registered Agent

7-19-10
Date

If signing on behalf of an entity:

Vicki Diaz
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 (8/05)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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