729331

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Office Use Only



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R. WHITE

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Heather Way Condominium Association				
Name of Corporation				
DOCUMENT NUMBER: 729331				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this mat	ter to the following:			
Cheryl Lee, President				
Name of Contact Person	·			
Heather Way Condominium Association				
Firm/Company	 			
677 Royal Palm Blvd. #3				
Address	.			
Vero Beach, FL 32960				
City/State and Zip Code				
Cherylfromet@aol.com				
E-mail address: (to be used for future annual rep	ort notification)			
For further information concerning this matter, pleas	e call:			
Nancy Richards, VP	at (772)538-1932 Area Code & Daytime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Dep	artment of State.			
Mailing Address:	Street Address:			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
_	P.O. Box 6327 The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314



and the state

FLORIDA DEPARTMENT OF STATE Division of Corporations

December 11, 2020

CHERYL LEE, PRESIDENT 677 ROYAL PALM BLVD #3 VERO BEACH, FL 32960

SUBJECT: HEATHER WAY CONDOMINIUM ASSOCIATION, INC.

Ref. Number: 729331

We have received your document for HEATHER WAY CONDOMINIUM ASSOCIATION, 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 document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

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) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 720A00025060

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COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: HOATHER WAY CONDUNION ASSOCIATION		
DOCUMENT NUMBER: 729331		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
CHRYL LEE		
(Name of Contact Person)		
(Firm/ Company)		
677 KOUDL PALL BLUD #3		
(Address)		
VCDO BCACH, FL. 32960 (City/ State and Zip Code)		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
NANCY Kichards 11 772-538-1932		
(Name of Contact Person) (Area Code) (Daytime Telephone Number)		
Enclosed is a cheek for the following amount made payable to the Florida Department of State:		
Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)		
Mailing Address Street Address		
Amendment Section Amendment Section Division of Corporations Division of Corporations		
P.O. Box 6327 The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Articles of factor poration
HEATHER WAY CONDIGINIVE ASSOCIATION WINC
(Name of Corporation as currently filed with the Florida Dept. of State)
729331
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006. Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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: 677 KDYGL IALL SUID (Principal office address MUST BE A STREET ADDRESS) 443
Vero BERTH, FL 32960.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) # 3
Vero Bach, 71. 32760
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: CHO STATE OF THE COURT AT THE STATE OF T
(5) / KUHH MART BLVD TT D (Florida street address)
New Registered Office Address: 190 Ble L. Florida 71 3296 0
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.
Signature of New Registered Agent, if changing
Signaturé of New Registèred Agent, if changing

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: X Change X Remove X Add	PT John D V Mike Jo SV Sally S	<u>ones</u>		· ·
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add	D	JASON LAURIA	100 Vista	KUALP & LVI)
Remove 2) Change Add		LEANN MOCHMON	677 KOYAL	1.74 32160
Remove Change Add Add	SIT	ANDIES YACYK 90	100 Vista K	13236Z
Remove 4) Change Add	SIT	MARY WILHOTH	6.77 x01/4	17 74 BLYD 17 76 32960
Remove 5) Change Add	Vρ	NANCY L. KKHIZUS	677 Ryy	16, 76. #11 32960
Remove 6) Change Add	Key Agent	ALAN KOKALO 9	VERO PSING	17432962
E. If amending or additional shed	ng additional Art	icles, enter change(s) here: (Be specific)	VERORBEACI 32	4, FL #3 960
·				
				

	1 % . *
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Signature Signature (But him a with a board regident or other officur if directors	
(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)	
(Typed or printed name of person signing) Pox (Dent + Elect + Algert + Algert +	
(Title of person signing)	s e te