

72942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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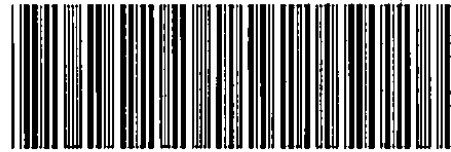
(Business Entity Name)

(Document Number)

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14/11/19

OCT 14 2019  
C. Kinsey

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: HAMMER POINT OWNERS ASSOCIATION, INC.

DOCUMENT NUMBER: 729427

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

Please return all correspondence concerning this matter to the following:

BURKE CANNON

(Name of Contact Person)

HAMMER POINT OWNERS ASSOCIATION, INC.

(Firm/ Company)

PO BOX 90

(Address)

TAVERNIER, FL. 33070

(City/ State and Zip Code)

burkecannon76@bellsouth.net

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

For further information concerning this matter, please call:

BURKE CANNON

305

394-0141

at

(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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

HAMMER POINT OWNERS ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

729427

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the f  
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  
"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:

New Registered Office Address:

(Florida street address)

(City)

Florida

(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.*

*Signature of New Registered Agent, if changing*

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed 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, Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, 1 Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

Example:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>X</u> Change	<u>V</u>	<u>ALDRIDGE, DEBORAH ANN</u>	<u>PO BOX 90, TAVERNIER,</u>
<u>      </u> Add			<u>33070</u>
<u>      </u> Remove			
2) <u>X</u> Change	<u>S</u>	<u>MORRISON, ALICE</u>	<u>PO BOX 90, TAVERNIER,</u>
<u>      </u> Add			<u>33070</u>
<u>      </u> Remove			
3) <u>      </u> Change	<u>T</u>	<u>KANE, HARLEY</u>	<u>PO BOX 90, TAVERNIER,</u>
<u>      </u> Add			<u>33070</u>
<u>X</u> Remove			
4) <u>      </u> Change	<u>V</u>	<u>SHINNERS, RICHARD</u>	<u>PO BOX 90, TAVERNIER,</u>
<u>X</u> Add			<u>33070</u>
<u>      </u> Remove			
5) <u>      </u> Change	<u>S</u>	<u>LOPEZ, MARY-BARRON</u>	<u>PO BOX 90, TAVERNIER,</u>
<u>X</u> Add			<u>33070</u>
<u>      </u> Remove			
6) <u>      </u> Change	<u>T</u>	<u>ALDRIDGE, DEBORAH ANN</u>	<u>PO BOX 90, TAVERNIER,</u>
<u>X</u> Add			<u>33070</u>
<u>      </u> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

REMOVE:	AT	HIGHT, HOLLY	PO BOX 90, TAVERNIER, FL 33
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ADD:	D	MORRISON, ALICE	PO BOX 90, TAVERNIER, FL. 3
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The date of each amendment(s) adoption: \_\_\_\_\_

date this document was signed.

Effective date if applicable: \_\_\_\_\_

(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 document's effective date on the Department of State's records.

Adoption of Amendment(s)

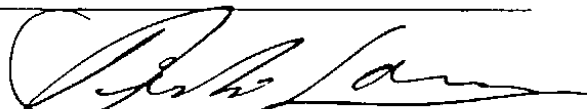
**(CHECK ONE)**

- ☒ 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.

SEPTEMBER 24, 2019

Dated

Signature



(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)

BURKE CANNON

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)