732373

(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(D	_
(Document Number)	
Sertified Copies Certificates of Status	_
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COVER LETTER

TO:

Amendment Section Division of Corporations

Name of Corporation					
DOCUMENT NUMBER: 732323					
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:					
James Thomas					
Name of Contact Person					
Meadow Wood Farms Property Owners Association					
Firm/Company					
11 Nashua Way					
Address					
Ocala FL 34482					
City/State and Zip Code					
foxdadt@yahoo.com					
E-mail address: (to be used for future annual repo	ort notification)				
For further information concerning this matter, please	e call:				
James Thomas	21 (7856915886)				
Name of Contact Person	at (7856915886) Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Depa	artment of State.				
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502 inge is submitted for a corporation organi ir to change its registered office or registe	zed under the laws of the State of Flor	rida
1. The name of t	the corporation: Meadow Wood Farms Prop	perty Owners Association, Inc	
2. The principal	office address: 11 Nashua Way Ocała, FI	_ 34482	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 7 April 1975	Document number: 732373	····
	I street address of the current registered ag tment of State: (If resigned, enter resigned	gent and registered office on file with t	he
	Pope-Hall, Leslie		
	20 Needles Drive		29
	OCALA, FL 34482		020 261
			2020 JUH - SE 1936 -
6. The name and (if changed):	I street address of the new registered agen	t (if changed) and /or registered office	· 63
	James H. Thomas		ڢ
	11 Nashua Way		22 (4) (1)
		NOT acceptable	
	Ocala, FL 34482		
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its re	egistered agent,
Such change wa authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an off ified in writing of the change.	icer so
		James H. Thomas, President	
Signatu	re of an afficer of director	Printed or typed name and title	
i juriner agree of my dutiës, ar document is bei	the appointment as registered agent and to comply with the provisions of all statud I am familiar with and accept the oblining filed merely to reflect a change in the been notified in writing of this change.	l agree to act in this capacity, ites relative to the proper and comple gation of my position as registered as registered office address, I hereby c	ete performance yent. Or, if this confirm that the
		l June 2020	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
T	yped or Printed Name		
	* * * FILING FE	E: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)