

734531

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000030023
Phone : (614) 280-3338
Fax Number : (954) 208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

REGISTERED AGENT CHANGE
VILLAGE GREEN HOMEOWNERS ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	1
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18 JAN 18 AM 9:48
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JAN 19 2018

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VILLAGE GREEN HOMEOWNERS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: 734531

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:

Jennifer Harroff

Name of Contact Person

CiraConnect

Firm/Company

3220 Keller Springs Rd #106

Address

Carrollton, Tx 75006

City/State and Zip Code

transition@ciramail.com

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

For further information concerning this matter, please call:

Jennifer Harroff

214 932-3609

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

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.

- The name of the corporation: VILLAGE GREEN HOMEOWNERS ASSOCIATION, INC.
- The principal office address: 9300 NORTH 16TH STREET TAMPA, FL 33612
- The mailing address (if different): _____
- Date of incorporation/qualification: 12/08/1975 Document number: 734531
- 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)

WINFIELD, JANET

9300 NORTH 16TH STREET

TAMPA, FL 33612

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

CT CORPORATION SYSTEM

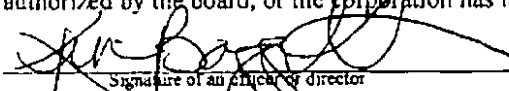
1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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.


Signature of an officer or director

KIM BAGGETT, SECRETARY

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.

CT Corporation System
By: 
Signature of Registered Agent

1/18/2017

Date

If signing on behalf of an entity:

MIKE JONES, ASSISTANT SECRETARY

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 (03/12)

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