

736 568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

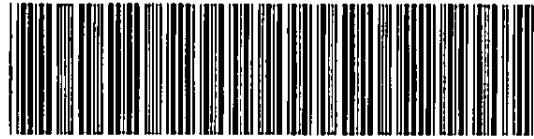
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE

JAN 27 2022

Office Use Only



300378919803

01/05/22--01012--015 \*\*35.00

FILED  
2022 JAN -5 AM 8:52  
SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Plantation Homeowners, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** 736568

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:

Ronald S. Trowbridge

Name of Contact Person

Plantation Homeowners, Inc

Firm/Company

11480 Plantation Blvd.

Address

Tampa, Florida 33624

City/State and Zip Code

manager@plantationhoa.com

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

For further information concerning this matter, please call:

Ronald S. Trowbridge

at (813) 969-3991

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: Plantation Homeowners, Inc.
2. The principal office address: 11480 Plantation Blvd., Tampa, Florida 33624
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 08/11/76 Document number: 736568
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)

Trowbridge, Ronald S, Manager

11380 Brookgreen Dr.

Tampa, Florida 33624

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

Trowbridge, Ronald S, Manager

11480 Plantation Blvd.

P.O. Box NOT acceptable

Tampa, Florida 33624

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

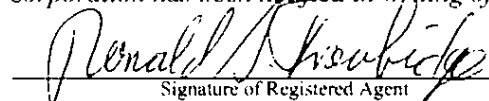
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Marcial Rivera, President

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.*

  
Signature of Registered Agent

12/17/21

Date

If signing on behalf of an entity:

\_\_\_\_\_  
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 (04/13)

FILED  
2022 JAN -5 AM 8:52  
SECRETARY OF STATE  
TALLAHASSEE, FL 32310