

742698



Ms. Bobbi Hicks
605 S. Gulfstream Ave.
Sarasota, FL 34236

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

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(Business Entity Name)

(Document Number)

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R.A. Charge
C.COULLETTE

SEP 04 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 29, 2009

MS. BOBBI HICKS
605 S. GULFSTREAM AVE
SARASOTA, FL 34236

SUBJECT: VERSAILLES OWNERS ASSOCIATION, INC.
Ref. Number: 742698

We have received your document for VERSAILLES OWNERS ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 509A00026017

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SEP - 1 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

• 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: VERSAILLES OWNERS ASSOCIATION, INC.
2. The principal office address: 605 S Gulfstream Ave., Sarasota, FL 34236
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/03/1978 Document number: 742698
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)

Harvey J Abel
240 S. Pineapple Avenue
Sarasota, FL 34236

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

Richard S. Loudermilk
240 S. Pineapple Ave., 11th Floor
P.O. Box NOT acceptable
Sarasota, FL 34236

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

Susan Lowy
Signature of an officer or director

Susan Lowy
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.

Richard S. Loudermilk
Signature of Registered Agent

8-10-09
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 (8/05)