(Re	equestor's Name)	
(Ad	ldress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
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02/02/12--01013--002 \*\*35.00

## **COVER LETTER**

Division of Corporations
SUBJECT: Property Dwner's Association of Huntington Name of Corporation
DOCUMENT NUMBER: 743172
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:
Letta D Betty Name of Contact Person
Firm/Company
5420 SE 1842 Lane Address

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

For further information concerning this matter, please call:

Letha D Betty at (352) 895-6683

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

Inc.

## 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: Property Dioner's Association of Hunting
2. The principal office address: 5420 SE 1842 Lane
Deala FL 34480
3. The mailing address (if different): PO BOX 663
51/ver5prings, FL 34489-0662
4. Date of incorporation/qualification: 681978 Document number: 743172
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)
Susan P Burnell - resigned
5300 SE alst Lane
Ocala FL 34480
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Letta D Betty II I
5420 SE 1846 Lane, & SE
P.O. Box NOT ecceptable
<u> </u>
The street address of its registered office and the street address of the business office of its registered agant, 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.
David Hill- President Signalife of an officer of director  David Hill- President
I hereby accept the appointment as registered agent and agree to act in this capacity. If 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 131 13 Date
If signing on behalf of an entity:
lesha D Rossi.
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)