

717579

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: THE ESCONDIDO COMMUNITY ASSOCIATION INC.

DOCUMENT NUMBER: 747579

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CANDACE A. KEELER

(Name of Contact Person)

THE ESCONDIDO COMMUNITY ASSOCIATION INC.

(Firm/ Company)

20 ESCONDIDO CR.

(Address)

ALTAMONTE SPRINGS, FL 32701

(City/ State and Zip Code)

ECACONDADOL.COM

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

For further information concerning this matter, please call:

CANDACE A. KEELER

(Name of Contact Person)

407-339-6162

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☒ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is  
Enclosed)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 14, 2017

CANDACE A. KEELER  
20 ESCONDIDO CT  
ALTAMONTE SPRINGS, FL 32701

SUBJECT: ESCONDIDO COMMUNITY ASSOCIATION, INC.  
Ref. Number: 747579

We have received your document for ESCONDIDO COMMUNITY ASSOCIATION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Bylaws are not filed with this office. Please retain them for your records.

Please print the name of the corporation on the top of page 1.

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) 245-6050.

Rebekah White  
Regulatory Specialist II

Letter Number: 117A00014243

RECEIVED  
17 JUL 31 PM 4:48  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

17 JAN 01 11:15

(Name of Corporation as currently filed with the Florida Dept. of State)

THE ESCOBARDO COMMUNITY ASSOCIATION INC.

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

(City) Florida (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action  
(Check One)

Title

Name

Address

- 1) ☐ Change T CATHERINE KOTOWSKI 8 ESCONDIDO CR #77  
☐ Add ALTAMONTE SPRINGS, FL 32701  
☒ Remove
- 2) ☐ Change T EILEEN BACO 13 ESCONDIDO CT #127  
☒ Add ALTAMONTE SPRINGS, FL 32701  
☐ Remove
- 3) ☐ Change V VONNIE EDWARDS 13 ESCONDIDO CT #125  
☒ Add ALTAMONTE SPRINGS, FL 32701  
☐ Remove
- 4) ☐ Change S ROBERT SHELDON 3 ESCONDIDO CR #12  
☒ Add ALTAMONTE SPRINGS, FL 32701  
☐ Remove
- 5) ☐ Change D LOIS GORDAN 2 ESCONDIDO CR #176  
☒ Add ALTAMONTE SPRINGS, FL 32701  
☐ Remove
- 6) ☐ Change \_\_\_\_\_  
☐ Add \_\_\_\_\_  
☐ Remove \_\_\_\_\_

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: 6-22-17  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 6-30-17

Signature Robert Sheldon  
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Robert Sheldon  
(Typed or printed name of person signing)

SECRETARY  
(Title of person signing)