## 748817

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Floral Lakes Homewner's Association, Inc.

Name of Corporation

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:

Robert C. Chilton

Name of Contact Person

Boswell & Dunlap, LLP

Firm/Company

245 S. Central Ave.

Bartow, FL 33830

City/State and Zip Code

robert@bosdun.com

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

For further information concerning this matter, please call:

Robert C. Chilton

DIS JAN 18 PH 1: 05

Name of Contact Person

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, 617.0 statement of change is submitted for a corporation org in order to change its registered office or reg	
1. The name of the corporation: Floral Lakes Ho	omeowner's Association, Inc.
2. The principal office address: 2055 S. Floral A	ve., No. 3, Bartow, FL 33830
3. The mailing address (if different): 2055 S. Floral	Ave., Office Clubhouse, Bartow, FL 33830
4. Date of incorporation/qualification: 09/06/1979	Document number: 748817
5. The name and street address of the current registere Florida Department of State: (If resigned, enter resigned)	d agent and registered office on file with the
Robert C. Chilton, Esq.	
99 6th St. SW	
Winter Haven, FL 33880	
6. The name and street address of the new registered a (if changed):	gent (if changed) and /or registered office
Robert C. Chilton, Esq.	HAN NO
<ul> <li>245 S. Central Avenue</li> </ul>	The To
Bartow, FL 33830	Of acceptable
The street address of its registered office and the streets changed will be identical.	et address of the business office of its registered agent.
Such change-was authorized by resolution duly adopt authorized by the board, or the corporation has been a	ed by its board of directors or by an officer so notified in writing of the change.
Signature of an officer of director	Joe Troccia, President
I hereby accept the appointment as registered agent of I further agree to comply with the provisions of all state performance of my duties, and I am familiar with and agent. Or if this document is being filed merely to rehereby confirm that the corporation has been notified	and agree to act in this capacity.  auties relative to the proper and complete I accept the obligation of my position as registered effect a change in the registered office address. I
	01/09/2019
If signing on behalf of an entity:	Date
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

\* \* \* FILING FEE: \$35.00 \* \* \*