## 149348

(Requestor's Name)	•	
(Address)		
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(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT	MAIL	
(Business Entity Name)		
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(Document Number)		
Certified Copies Certificates of Status		
Consideration to Siling Officers		
Special Instructions to Filing Officer:		
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Office Use Only

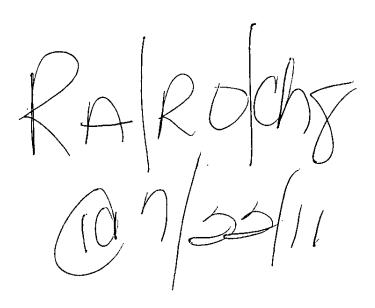


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SECRETARY OF STATE
DIVISION OF CORPORATIONS



## **COVER LETTER**

**Division of Corporations** SUBJECT: Heritage Ridge South Property Owners Association, L. Name of Corporation 749348 DOCUMENT NUMBER: 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: Elizabeth Bonan, Esquire Name of Contact Person Ross Earle & Bonan, P.A. Firm/Company 789 S Federal Highway, Suite 101 Address Stuart, FL 34994 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Elizabeth Bonan Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Mailing Address: Amendment Section Amendment Section

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

TO:

Amendment Section

## • STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida inge is submitted for a corporation organized under the laws of the State of r to change its registered office or registered agent, or both, in the State of I	Florida
1. The name of t	the corporation: Heritage Ridge South Property Owners A	Association, Inc.
2. The principal	office address: 8201 SE Constitution Blvd	
Hobe Sou	nd, FL 33455	
3. The mailing a	ddress (if different): same as above	
4. Date of incorp	poration/qualification: 10/16/1979 Document number:	749348
	I street address of the current registered agent and registered office on file writment of State: (If resigned, enter resigned)	ith the
	Bonan, Elizabeth , Esq.	_
	759 S Federal Highway, Suite 212	_
	Stuart, FL 34994	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered of Ross Earle & Bonan, P.A.	BECRETARY DIVISION OF CO.
	789 S Federal Highway, Suite 101	_
	P.O. Box NOT acceptable  Stuart, FL 34994	A 9:
The street address changed will	ess of its registered office and the street address of the business office of be identical.	<b>F</b> 97
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an e board, or the corporation has been notified in writing of the change.	n officer so
Ann	re of an officer or director  Printed or typed name and	VICE PLBIVENT
I hereby accept I further agree of my duties, ar document is bet corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and cond I am familiar with and accept the obligation of my position as registering filed merely to reflect a change in the registered office address, I here is been notified in writing of this change.	mplete performance ed agent. Or, if this eby confirm that the
Gm	nature of Registered Agent 7/19/11  Date	
	chalf of an entity:	
ELIZAGETH	Y CONAN, ESO.  yped or Printed Name	

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