

754485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

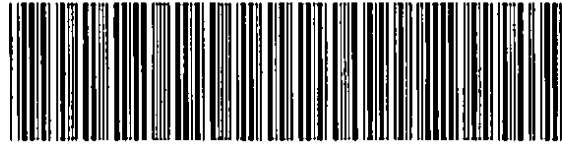
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2017 NOV 20 AM 10:06
SECURITY, FINANCIAL
FALLAHASSEE, FLORIDA

Amend/CC

NOV 21 2017
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: THE LANDINGS AT LAKE CONWAY HOMEOWNERS ASSOCIATION, INC

DOCUMENT NUMBER: 754485

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

Please return all correspondence concerning this matter to the following:

MICHAEL HARDS, TREASURER
(Name of Contact Person)

THE LANDINGS AT LAKE CONWAY HOMEOWNERS ASSOCIATION, INC
(Firm/ Company)

3525 ADMIRALTY CT
(Address)

BELLE ISLE, FL 32812
(City/ State and Zip Code)

mhhards@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL HARDS at 407 496-1639
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

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

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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

Articles of Amendment
to
Articles of Incorporation
of

The Landings at Lake Conway Homeowners Association, Inc.

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

754485

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida 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," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

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

3525 ADMIRALTY COURT
BELLE ISLE, FL 32812

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

3525 ADMIRALTY CT
BELLE ISLE, FL 32812

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 MICHAEL HARDS
3525 ADMIRALTY CT
(Florida street address)

New Registered Office Address: BELLE ISLE, Florida 32812
(City) (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.

Michael Hards
Signature of New Registered Agent, if changing

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2017 NOV 20 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change
Add
☒ Remove

P

TRACY FRENKEL

3519 COUNTRY LKS DR
ORLANDO, FL 32812

2) ☐ Change
☒ Add
Remove

P

DAVE GRANT

3506 COUNTRY LKS DR
BELLE ISLE, FL 32812

3) ☐ Change
Add
☒ Remove

V

SHANON LINGBORG

3838 COUNTRY LKS DR
ORLANDO, FL 32812

4) ☐ Change
☒ Add
Remove

V

JOEL RICHWAGEN

3520 COUNTRY LKS DR
BELLE ISLE, FL 32812

5) ☐ Change
Add
☒ Remove

T

MIKE LONG

3509 ADMIRALTY CT
ORLANDO, FL 32812

6) ☐ Change
☒ Add
Remove

T

MICHAEL HARDS

3525 ADMIRALTY CT
BELLE ISLE, FL 32812

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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

- | | | | |
|--|----------|-------------------------|--|
| 7) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>S</u> | <u>SUSAN LONG</u> | <u>3509 ADMIRALTY CT</u>
<u>ORLANDO, FL 32812</u> |
| 8) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>S</u> | <u>SHANNON MAYNARD</u> | <u>3550 COUNTRY LKS DR</u>
<u>BELLE ISLE, FL 32812</u> |
| 9) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>D</u> | <u>MICHAEL HARDS</u> | <u>3525 ADMIRALTY CT</u>
<u>BELLE ISLE, FL 32812</u> |
| 10) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>D</u> | <u>JOHN HEFFERNAN</u> | <u>3510 ADMIRALTY CT</u>
<u>BELLE ISLE, FL 32812</u> |
| 11) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>D</u> | <u>SHELLEY ST JOHN</u> | <u>6500 THE LANDINGS DR</u>
<u>BELLE ISLE, FL 32812</u> |
| 12) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>D</u> | <u>SHANNON LINDBORG</u> | <u>3538 COUNTRY LKS DR</u>
<u>BELLE ISLE, FL 32812</u> |

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:

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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) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>D</u> | <u>JR BELIVEAU</u> | <u>3514 COUNTRY LKS DR.</u>
<u>BELLE ISLE, FL 32812</u> |
| 2) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>D</u> | <u>SUSAN LONG</u> | <u>3509 ADMIRALTY CT</u>
<u>ORLANDO, FL 32812</u> |
| 3) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>D</u> | <u>HELEN JACOBS</u> | <u>6657 THE LANDINGS DR</u>
<u>BELLE ISLE, FL 32812</u> |
| 4) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>D</u> | <u>KAREN PICCININI</u> | <u>6609 THE LANDINGS DR.</u>
<u>BELLE ISLE, FL 32812</u> |
| 5) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>D</u> | <u>JEAN LUCE</u> | <u>6508 THE LANDINGS DR</u>
<u>BELLE ISLE, FL 32812</u> |
| 6) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | | | |

The date of each amendment(s) adoption: JULY 15, 2017, if other than the date this document was signed.

Effective date if applicable: JULY 15, 2017
(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 11/15/17

Signature Dave Grant
(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)

DAVE GRANT
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)