

759571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

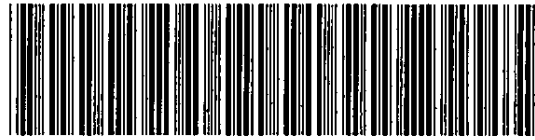
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400133450674

07/28/08--01035--006 \*\*35.00

FILED

2008 AUG 18 AM 9:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A. Change

TB

8/20/08

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Holiday Lake Villas Condominium Association , Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** 759571

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:

Josephine S. Azevedo

(Name of Contact Person)

Holiday Lake Villas Condominium Association, Inc.

(Firm/Company)

3931 Sailmaker Lane

(Address)

Holiday, Florida 34691

(City/State and Zip Code)

For further information concerning this matter, please call:

Josephine S. Azevedo

(Name of Contact Person)

at ( 727 ) 942-4189

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 1, 2008

HOLIDAY LAKE VILLAS CONDOMINIUM ASSOCIATION, INC.  
JOSEPHINE S AZEVEDO  
3931 SAILMAKER LANE  
HOLIDAY, FL 34691

SUBJECT: HOLIDAY LAKE VILLAS CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: 759571

We have received your document for HOLIDAY LAKE VILLAS CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6925.

Teresa Brown  
Regulatory Specialist II

Letter Number: 008A00044217

**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: Holiday Lake Villas Condominium Association, Inc.
2. The principal office address: 3931 Sailmaker Lane, Holiday Florida 34691
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: Aug. 11, 1981 Document number: 759571
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Reardon Marueen C

4151 Woodlands Parkway

Falm Harbor, Florida 34685 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Josephine S. Azevedo

3966 Sailmaker Lane

(P.O. Box NOT acceptable)

Holiday, Florida 34691

**FILED**  
2008 AUG 18 AM 9:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, 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.

Josephine S. Azevedo  
(Signature of an officer or director)

Josephine S. Azevedo  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I 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.*

Josephine S. Azevedo  
(Signature of Registered Agent)

August 8, 2008  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(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)