(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



100144569081

03/02/09--01009--022 **35.00

COVER LETTER

Amendment Section Division of Corporations

TO:

,			
SUBJECT: Holiday Lake Villas Condomin (Name of Co	ium Association, Inc.		
(Name of Co	orporation)		
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:		
Burton	Hecker		
(Name of Contact Person)			
Holiday Lake Villas Condominium Association, Inc.			
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 concerning this matter than the please concerning this matter than the please concerning the pl	all:		
Purton Hooker			
Burton Hecker (Name of Contact Person)	at (<u>727</u>) <u>934-6735</u> (Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Departs	ment of State.		
Mailing Address: Amendment Section	Street Address:		
	Amendment Section		
Division of Corporations P.O. Box 6327	Division of Corporations		
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle		
Tallahassee, FL 32314	2001 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. statement of change is submitted for a corporation or in order to change its registered office or re	
1. The name of the corporation: Holiday Lake Vil	las Condomínium Association, Inc.
2. The principal office address: 3931 Sailmaker	Lane, Holiday, Florida 34691
3. The mailing address (if different):	······································
4. Date of incorporation/qualification: April 11, 19	081 Document number: 759571
5. The name and street address of the current register. Florida Department of State: (If resigned, enter res	
Holiday Lake Villas Condomi	nium Association, Inc.
3931 Sailmaker Lane	
Holiday, Florida 34691	
6. The name and street address of the new registered (if changed):	agent (if changed) and /or registered office
Burton Hecker	TSE STAR
3932 Sailmaker Lane (P.O. Box NOT accept	
Haliday Elarida 24604	
The street address of its registered office and the stras changed will be identical.	reet address of the business office of its regist
Such change was authorized by resolution duly add authorized by the board, or the corporation has been	opted by its board of directors or by an officer so in notified in writing of the change.
(Signature of an officer of director)	Burton Hecker, President (Printed or typed name and title)
I hereby accept the appointment as registered agen I further agree to comply with the provisions of all of my duties, and I am familiar with and accept the document is being filed merely to reflect a change i corporation has been notified in writing of this cha	t and agree to act in this capacity. statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the nge.
(Signature of Registered Agent)	March 2, 2009 (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)