## 811920

(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.
J. HORNE AUG - 7 2023

Office Use Only



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06/20/23--01025--012 \*\*140.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Baird Homes of Florida, Inc	
Name of Corporation	
DOCUMENT NUMBER: 811920	
The enclosed Statement of Change of Regist	tered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Jenna Kullmann	
Name of Contact Person	
Baird Home Corporation	
Firm/Company	<del></del> _
3495 U.S. Hwy 441	
Address	
Fruitland Park, FL 34731	
City/State and Zip Code	
jkullmann@bairdcorp.cor	m
E-mail address: (to be used for future ann	nual report notification)
For further information concerning this matter	er, please call:
Kacie DeArmond	at ( 352 ) 787-2500
Name of Contact Person	at ( 352 ) 787-2500 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to	the Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
r arranassee, 1 12 52514	Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	inge is submitted for a corporation	617,0502, 607,1508, or 617,1508, Florida Statute on organized under the laws of the State of Indian or registered agent, or both, in the State of Florida	na
1. The name of	the corporation: Baird Homes of Fi	lorida, Inc	
2. The principal	office address: 3495 U.S. Hwy 44	1 Fruitland Park, FL 34731	
3. The mailing a	address (if different):		<del></del>
		Document number: 811920	
	d street address of the current registrement of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	Humphrey, Durlan Dean	·	
	35800 Grays Airport Road S		
	Fruitland Park, FL 34731		
6. The name and (if changed):	I street address of the new register	red agent (if changed) and /or registered office	
	Charles D. Johnson		
	907 Webster Street	į	
		P.O. Box NOT acceptable	₩ 2
	Leesburg, FL 34748	<del></del>	
The street addreas changed will	ess of its registered office and the be identical.	e street address of the business office of its regis	nered agent.
Such change wa authorized by th	as authorized by resolution duly and board, or the corporation has b	adopted by its board of directors or by an offer been notified in writing of the change.	rso <b>3</b>
Michigaly	Zast haph	Michael Brent Humphrey, President  Printed or typed name and title	
I halahy accont	the appointment as registered as to comply with the provisions of a lamifamiliar with and accept to glied merely to reflect a change been notified in writing of this contacts.	gent and agree to act in this capacity, all statutes relative to the proper and complete p the obligation of my position as registered agen ge in the registered office address, I hereby conp change	performance 1. Or, if this firm that the
//		06 1-4 23	
Sig	nature of Registered Agent	Date	
	half of an entity:		
	Charles D. Johnson	_	
	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327. TALLAHASSEE, FL 32314

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