

N00 0000005133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

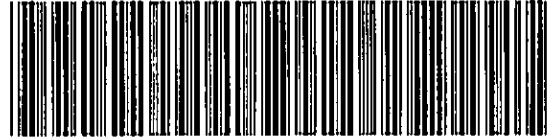
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Office Use Only



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FILED  
2022 OCT 17 AM 8:04  
CLERK OF DISTRICT COURT  
JULIA M. HARRIS, JR.

A P. 1. 1

OCT 19 2022

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: St. Cloud Reserve Home Owners Assn.

DOCUMENT NUMBER: N00000005133

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

Please return all correspondence concerning this matter to the following:

Edward Evans

(Name of Contact Person)

—

(Firm/ Company)

2821 Laurel Leaf Dr.

(Address)

Valrico FL 33594

(City/ State and Zip Code)

stcloudreserve@gmail.com

E-mail address. (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward Evans

(Name of Contact Person)

at

813-293-4443

(Area Code) (Daytime Telephone Number)

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

X

\$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is  
Enclosed)

*already  
sent in*

Mailing Address

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2022 OCT 17 AM 8:04

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

St. Cloud Reserve Home owners Assoc.

(Document Number of Corporation (if known))

1100000005133

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For 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" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Edward EVANS

2821 Laurel Leaf Dr.

(Florida street address)

New Registered Office Address:

Valrico

(City)

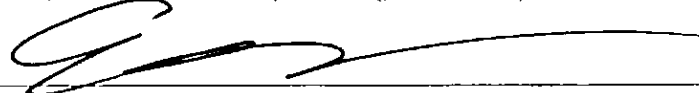
Florida

33594

(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*



Signature of New Registered Agent, if changing

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:

<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<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove            | <u>T</u>  | <u>Ellis, Shari</u>    | <u>2805 Laurel Leaf Dr</u><br><u>Valrico FL 33594</u>  |
| 2) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>T</u>  | <u>Lester, Michael</u> | <u>2825 Laurel Leaf Dr.</u><br><u>Valrico FL 33594</u> |
| 3) <input checked="" type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | <u>P</u>  | <u>Smith, Dewey</u>    | <u>2803 Laurel Leaf Dr.</u><br><u>Valrico FL 33594</u> |
| 4) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>P</u>  | <u>Evans, Edward</u>   | <u>2821 Laurel Leaf Dr.</u><br><u>Valrico FL 33594</u> |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove                       | <u>VP</u> | <u>Shunyan, Greg</u>   | <u>2829 Laurel Leaf Dr</u><br><u>Valrico FL 33594</u>  |
| 6) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove            | <u>VP</u> | <u>Evans, Michelle</u> | <u>2821 Laurel Leaf Dr.</u><br><u>Valrico FL 33594</u> |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

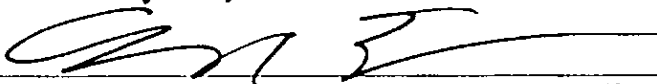
[illegible]

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Adoption of Amendment(s) (CHECK ONE)**

~~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 8/20/22

Signature 

(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)

Edward Evans  
(Typed or printed name of person signing)

President  
(Title of person signing)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 5, 2022

EDWARD EVANS  
2821 LAUREL LEAF DR.  
VALRICO, FL 33594

SUBJECT: ST. CLOUD RESERVE HOMEOWNERS ASSOCIATION, INC.  
Ref. Number: N00000005133

We have received your document for ST. CLOUD RESERVE HOMEOWNERS 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):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6050.

Anissa Butler  
Regulatory Specialist II

Letter Number: 422A00022160

OCT 17 2022



RECEIVED

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2022 OCT -3 AM 11:19

August 17, 2022

EDWARD EAVAN  
2821 LAUREL LEAF DR.  
VALRICO, FL 33594

SUBJECT: ST. CLOUD RESERVE HOMEOWNERS ASSOCIATION, INC.  
Ref. Number: N00000005133

We have received your document for ST. CLOUD RESERVE HOMEOWNERS 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):

The form you submitted is for a CORPORATION, but your entity is a FLORIDA NONPROFIT CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Anissa Butler  
Regulatory Specialist II

Letter Number: 022A00018305