## 1100443

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PICK-UP WAIT MAIL					
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(Document Number)					
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

APR 0 9 2015 T. CARTER



February 16, 2015

BECKER & POLIAKOFF, P.A. 111 N. ORANGE AVENUE SUITE 1400 ORLANDO, FL 32801 US

SUBJECT: CAREFREE COUNTRY CLUB OF WINTER HAVEN, INC.

Ref. Number: N00443

We have received your document for CAREFREE COUNTRY CLUB OF WINTER HAVEN, 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 current name of the entity is as referenced above. Please correct your document accordingly.

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.

Tina D Carter Regulatory Specialist

Letter Number: 915A00003203

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

Converses The CARLOT ROLL May

statement of che	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S inge is submitted for a corporation organized under the laws of the State of $\underline{\underline{F}}$ ir to change its registered office or registered agent, or both, in the State of F	lorida		_
1. The name of	the corporation: Carefree Country Club of Winter Haven, In	с		
_	office address: 9705 Lake Bess Road, Office aven, FL 33884			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 12/19/1983 Document number: N0044	3		
5. The name and	I street address of the current registered agent and registered office on file wit rtment of State: (If resigned, enter resigned)	h the		
	Grothmann, Curt R.			
	9705 Lake Bess Road		; <u>.</u>	7,0
	Winter Haven, FL 33884		5 APR	ECRE
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offi	ce	-3 PM	TARY OF IASSEE,
	Becker & Poliakoff, P.A.		င္ပာ ယ	107.4 11.5
	111 N. Orange Avenue, Suite 1400		≃	ATE ADA
	Orlando, FL 32801			
The street addre	ess of its registered office and the street address of the business office of its be identical.	regist	ered ag	ent,
_	is authorized by resolution duly adopted by its board of directors or by an orac board, or the corporation has been notified in writing of the change.	fficer	so	
Robert Signatu	ROBERT J. DE Printed or typed name and title	B	ORD	_
l further agree i g <u>erform</u> ance of agent_Or, i£thi	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and comp my duties, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered office that the corporation has been notified in writing of this change.	lete 15 reg addre	istered ess, I	
Sign	nature of Registered Agent Date			_
Kober	thalf of an entity:  H. Taillot, Office Managing Sharch  Appel or Printed Name 1	Old	107	

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