

NO/000000007

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2007 DEC 13 PM 12:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PA
Change
SG

12/14/07



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 30, 2007

BONNIE MERTELY
5726 PINEDALE LANE
LAKELAND, FL 33811

SUBJECT: OAKVIEW UNIT 9 HOMEOWNERS ASSOCIATION, INC.
Ref. Number: N01000000007

We have received your document for OAKVIEW UNIT 9 HOMEOWNERS ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

, Letter Number: 407A00068029

RECEIVED
2007 DEC 13 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: OAKVIEW UNIT 9 HOMEOWNERS ASSOCIATION, INC
(Name of Corporation)

DOCUMENT NUMBER: N01000000007

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:

BONNIE MERTELY
(Name of Contact Person)

(Firm/Company)

5726 PINEDALE LANE
(Address)

LAKELAND, FL 33811
(City/State and Zip Code)

For further information concerning this matter, please call:

BONNIE MERTELY at (863) 644-9787
(Name of Contact Person) (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

**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: OAKVIEW UNIT 9 HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: 5726 PINEDALE LANE
LAKELAND, FL 33811
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 9/17/2007 Document number: N01000000007
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

GEORGE R. BURT
215 MCDONALD STREET
LAKELAND, FL 33803

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

BONNIE MERTELY
5726 PINEDALE LANE
(P.O. Box NOT acceptable)
LAKELAND, FL 33811

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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.


(Signature of an officer or director)

BONNIE MERTELY, SECRETARY/TREASURER
(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.


(Signature of Registered Agent)

12-11-07
(Date)

If signing on behalf of an entity:

BONNIE MERTELY, SECRETARY/TREASURER
(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)