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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	A COMMUNITY	FOUNDATION INC	<u>-</u>
DOCUMENT NUMBER:		,	
The enclosed Articles of Amendment and fee	e are submitted for filing.		
Please return all correspondence concerning to	this matter to the following:		19 H
Duane Volus	50N		19 HON 25
	(Name of Contact Perso	n)	
VHA COMM WIT	y FOUNDATION		
	(Firm/ Company)		ى
1104 MAIN ST	(Address)		
	(Address)		
The Villages	FL 32/59 (City/ State and Zip Cod		
7 ,	(City/ State and Zip Cod	e)	
N mail address (	be used for future annual report	noti Francou V	<del></del>
		notification)	
For further information concerning this matte	r, please call:		
N/A	at	rea Code) (Daytime Telephone Numb	
(Name of Contac	et Person) (As	rea Code) (Daytime Telephone Numb	er)
Enclosed is a check for the following amount	made payable to the Florida Depa	artment of State:	
\$35 Filing Fee \$43.75 Filing Certificate of		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address		Address	
Amendment Section	Ameno	lment Section	

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

## to Articles of Incorporation of

	01	<u> </u>
VHA COMMUNITY FO (Name of Corporation as curren	UNDATION	Dept. of State) 0286 8
(Name of Corporation as curren	tly filed with the Florida	Dept. of State)
Λ/	0100000	078/0 6
(Document Numb	er of Corporation (if knov	vn) - 5
Pursuant to the provisions of section 617.1006, Florida Statuto mendment(s) to its Articles of Incorporation:	es, this <i>Flo<b>rida Not For P</b></i>	rofit Corporation adopts the following
. If amending name, enter the new name of the corporat	ion:	
NA		The new
ame must be distinguishable and contain the word "corpora	tion" or "incorporated"	or the abbreviation "Corp." or "Inc."
Company" or "Co." may not be used in the name.	·	
Tean consist of the second sec	NA	
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS		
metput office dual oss into a martin	<u> </u>	
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	/	
(Mailing address MAY BE A POST OFFICE BOX)	NA	
	<del></del>	<del></del>
). If amending the registered agent and/or registered office		ter the name of the
new registered agent and/or the new registered office a	1.	
Name of New Registered Agent:	NA	
	(	
···	(Floria	da street address)
New Registered Office Address:	1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		<u></u>
	(City)	Florida (Zin Coda)
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registered	Agent:	
hereby accept the appointment as registered agent. I am fa		e obligations of the position.
	NA	
	ignature of New Registere	ed 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: X Change X Remove X Add	PT         John D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>	LINDA GRZESIK	1104 MAIN ST
Add Remove			LADY LAKE FL
2) Change	TR	John Conboy	1104 MAIN ST
Add Remove			LADY LAKE FL 32159
3) Change	TR	FRED Dehling	1104 MAIN ST
Add Remove			LADY LAKE, FL
4) Change	<u> </u>	LINDA McPhERSON	LAPY LAKE FL
Remove			32159
5) Change Add			
Remove			
6) Change Add		<del></del>	
Remove		B 2.4	

(attach additional sheets, if necessary).	(Be specific)				
NA					
	<del></del>	<del></del> :			
				<del></del>	 
<u> </u>	<u> </u>				
	<del>.</del>		<del></del>		 
				···	 
		<del></del>		· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendmen	n file date)
Note: If the date inserted in this block does not meet the applicable statutory filin document's effective date on the Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of vote was/were sufficient for approval.	es cast for the amendment(s)
There are no members or members entitled to vote on the amendment(s). The adopted by the board of directors.	e amendment(s) was/were
Signature Signature	
(By the chairman or vice chairman of the board, president	
have not been selected, by an incorporator – if in the hand other court appointed fiduciary by that fiduciary)	
- John A (on Boy To	<u> </u>
(Typed or printed name of pers	on signing)
TRIASURER	
(Title of person sig	ning)