

NO 1000008251

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

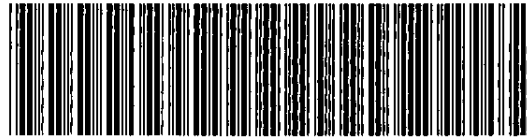
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Amendment Section
Division of Corporations



SUBJECT: South Fork of Hillsborough County Homeowner Assoc
Name of Corporation

DOCUMENT NUMBER: N01000008251

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:

Diane G Lee
Name of Contact Person

DLG Management Services
Firm/Company

307 S Willow Avenue, Suite 100
Address

Tampa, Florida 33606
City/State and Zip Code

dlee@dlgmt.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diane G lee at (813) 254-1600
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: South Fork of Hillsborough County Homeowners Association Inc.
2. The principal office address: 307 S. Willow Ave, Tampa, FL 33606
3. The mailing address (if different): Same

4. Date of incorporation/qualification: 2001 Document number: NO1000008251
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

DLG Management Services
611 West Bay Street
Tampa, FL 33606

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

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

NEW
Address

DLG Management Services
307 S Willow Ave, Suite 100
P.O. Box NOT acceptable
Tampa, FL 33606

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.

Diane Lee
Signature of an officer or director

Diane Lee
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.

Diane Lee
Signature of Registered Agent

8/8/11

Date

If signing on behalf of an entity:

DIANE LEE
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)