

No 2000007555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

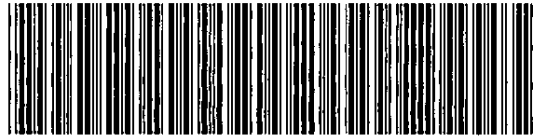
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2009 JUL 29 PM 2:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AJR  
7/29/09

\*00789, 04076, 00524, 00671



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 15, 2009

Denise Helbig  
West Coast Management  
14813 Turner Road  
Tampa, FL 33624

SUBJECT: EAST BAY LAKES HOMEOWNERS ASSOCIATION, INC.  
Ref. Number: N02000007555

We have received your document for EAST BAY LAKES 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):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

If you wish to amend your annual report you must do so online with a credit card. Our website address is [www.sunbiz.org](http://www.sunbiz.org). The fee to file an amended annual report is \$61.25. Or you may fill out the enclosed articles of amendment form and return it to us along with a copy of this letter. You may use the \$35.00 fee that you have already submitted to file the articles of amendment

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) 245-6907.

Annette Ramsey  
Regulatory Specialist II

Letter Number: 209A00024341

RECEIVED  
2009 JUL 23 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** East Bay Lakes Homeowners Association Inc.

**DOCUMENT NUMBER:** NO 2000007555

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

Please return all correspondence concerning this matter to the following:

Camille Sanabria

(Name of Contact Person)

West Coast Management

(Firm/ Company)

14813 Turner Road

(Address)

Tampa, FL 33624

(City/ State and Zip Code)

wcrealty.hoa@verizon.net

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

For further information concerning this matter, please call:

Camille Sanabria

(Name of Contact Person)

at ( 813 ) 908-0766

(Area Code & Daytime Telephone Number)

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

☐ \$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)

**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

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
2009 JUL 29 PM 2:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

East Bay Lakes Homeowners Association Inc

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

NO2000007555

(Document Number of Corporation (if known))

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:

New Registered Office Address:

(Florida street address)

(City)

, Florida

(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

(Attach additional sheets, if necessary)

see attached for further amendments

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

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(Attach additional sheets, if necessary)

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

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

[illegible]

The date of each amendment(s) adoption: 7-26-09  
(date of adoption is required)

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

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

☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☒ 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 7/26/09

Signature Cheryl Marple  
(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)

Cherilyn Marple  
(Typed or printed name of person signing)

President  
(Title of person signing)