

NO200008695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

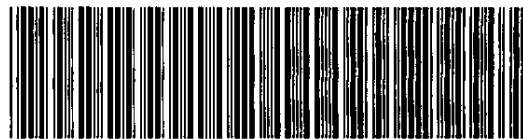
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 OCT -7 AM 10:43

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10' 8/10

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: WATERSTONE HOMEOWNERS ASSOCIATION INC

DOCUMENT NUMBER: N02000008695

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

Please return all correspondence concerning this matter to the following:

STEVEN ROSENSTOCK

(Name of Contact Person)

WATERSTONE HOMEOWNERS ASSOCIATION INC

(Firm/ Company)

5703 RED BUG LAKE RD #282

(Address)

WINTER SPRINGS, FL 32708

(City/ State and Zip Code)

waterstonehoaoviedo@gmail.com

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

For further information concerning this matter, please call:

Shirleyann Hughes

(Name of Contact Person)

at (407) 758-6080

(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

WATERSTONE HOMEOWNERS ASSOCIATION INC

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

N02000008695

(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)

1267 PIMA PT

OVIEDO, FL 32765

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5703 RED BUG LAKE RD #282

WINTER SPRINGS, FL 32708

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:

Homeowner and Condominium Association

1267 PIMA PT

New Registered Office Address:

(Florida street address)

OVIEDO

(City)

Florida 32765

(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>SHIRLEYANN HUGHES</u>	<u>1267 PIMA PT</u> <u>OVIEDO, FL 32765</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>T</u>	<u>JOY AVILES</u>	<u>1259 PIMA PT</u> <u>OVIEDO, FL 32765</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>PD</u>	<u>STEVEN ROSENSTOCK</u>	<u>1275 PIMA PT</u> <u>OVIEDO, FL 32765</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

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

CONTINUED AMENDMENT OF OFFICER AND DIRECTORS:

ADD: MARK GRANT, 1271 PIMA PT, OVIEDO, FL 32765; TITLE: VPD

ADD: WILLIAM MAYES, 1291 PIMA PT, OVIEDO, FL 32765; TITLE: TSD

REMOVE: HAYES, BILL; 1291 PIMA PT, OVIEDO, FL 32765, ERROR IN FILING NAME

DUPLICATE ON CURRENT RECORD, SAME DIRECTOR AS WILLIAM MAYES.

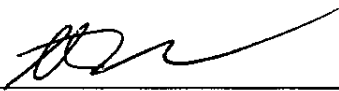
The date of each amendment(s) adoption: OCTOBER 1, 2010
(date of adoption is required)

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 OCTOBER 1, 2010

Signature 
(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)

STEVEN ROSENSTOCK
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)