

N02355

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

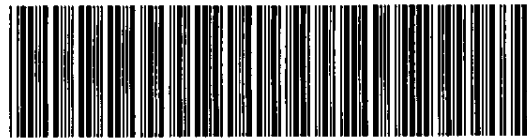
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600220561176

02/10/12--01032--005 **35.00

12 MAR 29 AM 8:16

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

RA/RO/chg
①a 3/30/12

COVER LETTER

TO: Amendment Section:
Division of Corporations

SUBJECT: Oakcreek Caverns Lot Owners Association, Inc
Name of Corporation

DOCUMENT NUMBER: N02355

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:

GARRY GRIFFIN
Name of Contact Person

BOSSHARDT PROPERTY MANAGEMENT
Firm/Company

2123 SW 20 PLACE
Address

OCALA, FL 34471
City/State and Zip Code

GARRY@BOSSHARDT.COM.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GARRY GRIFFIN at (352) 671-8203
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



RECEIVED

MAR 10 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 6, 2012

GARRY GRIFFIN
BOSSHARDT PROPERTY MANAGEMENT
2123 SW 20 PLACE
OCALA, FL 34471

SUBJECT: OAKCREEK CAVERNS LOT OWNERS ASSOCIATION, INC.
Ref. Number: N02355

We have received your document for OAKCREEK CAVERNS LOT OWNERS 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):

You failed to make the correction(s) requested in our previous letter.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 712A00008636

RECEIVED

12 MAR 29 AM 9:45

TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 13, 2012

GARRY GRIFFIN
BOSSHARDT PROPERTY MANAGEMENT
2123 SW 20 PLACE
OCALA, FL 34471

SUBJECT: OAKCREEK CAVERNS LOT OWNERS ASSOCIATION, INC.
Ref. Number: N02355

We have received your document for OAKCREEK CAVERNS LOT OWNERS 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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

The document must contain the name and capacity of the person signing on behalf of the new registered agent.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 412A00006335

RECEIVED
12 MAR -6 AM 8:34
TALLAHASSEE, FLORIDA

**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: OAKCREEK CAVERNS LOT OWNERS ASSOC.
2. The principal office address: 2123 SW 20 PLACE
OCALA, FL 34471
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/22/91 Document number: NO2355
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)

LAWRENCE Callaway
333 NW 3rd Ave
OCALA, FL 34475

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

BOSSHARDT PROPERTY MANAGEMENT LLC
2123 SW 20 PLACE
P.O. Box NOT acceptable
OCALA, FL 34471

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.

→ Stephen P. Kiser
Signature of an officer or director

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.

Murray H. Griffin
Signature of Registered Agent

1-16-12
Date

If signing on behalf of an entity:

GARRY H. GRIFFIN
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)