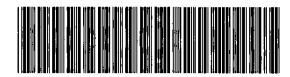
## ND30000/184

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T. CARTER

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

SUBJECT: WHIDDEN'S HOMEOWNERS ASSOCIATION

Name of Corporation

DOCUMENT NUMBER, NO3000001184

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:

CAROL S. HELD

Name of Contact Person

WHIDDEN'S HOMEOWNERS ASSOCIATION

Firm/Company

731 NAVEL

Address

FROSTPROOF, FL 33843

City/State and Zip Code

bassin487@gmail.com

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

For further information concerning this matter, please call:

CAROL S. HELD

<sub>\*\*</sub>330

206-0909

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

stutement of cha in order	provisions of sections 607.0502, 617.0502, 603 ange is submitted for a corporation organized t er to change its registered office or registered a	agent, or both, in the State of Florida.
<ol> <li>The name of t</li> <li>The principal</li> </ol>	the corporation: WHIDDEN'S HOMEO office address: 731 NAVEL, FROSTP	WNERS ASSOCIATION, INC.
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: FEBRUARY 6, 2003	Document number: N0300001184
	d street address of the current registered agent artment of State: (If resigned, enter resigned)	and registered office on file with the
	NANCY DANCHO	
	426 HAMLIN LOOP	TALL SEC
	FROSTPROOF, FL 33843	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	CAROL S. HELD	1ATE 20
	731 NAVEL	) <del>o</del> ·
	P.O. Box NOT accept	able
	FROSTPROOF, FL 33843	
The street address changed will	ress of its registered office and the street address to be identical.	ess of the business office of its registered agent,
Such change wa authorized by the	vas authorized by resolution duly adopted by it the board, or the corporation has been notified	ts board of directors or by an officer so lin writing of the change.
Georg	Jranis GE	ORGE W. TRAINER, PRESIDENT H.O.A.
I hereby accept I further agree performance of agent. Or, if th hereby confirm	ture of an officer of director If the appointment as registered agent and agr to comply with the provisions of all statutes r f my duties, and I am familiar with and accept his document is being filed merely to reflect a In that the corporation has been notified in wri	Printed or typed name and title ree to act in this capacity. relative to the proper and complete t the obligation of my position as registered change in the registered office address, I ting of this change.
Carols	S. Wald gnature of Registered Agent	3-19-14
_	ehalf of an entity:	Date
Т	Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*