

N040000002382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

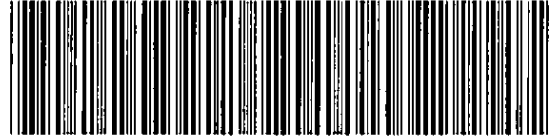
(Business Entity Name)

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*ME*



September 12, 2023

**VIA FEDERAL EXPRESS**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Caleb J. Grimes  
Jack Hawkins  
Bill Galvano  
Derin Parks  
Kyle W. Grimes  
Neil G. Taylor  
Mitchell O. Palmer  
Stephen R. Josephik  
Chad Manausa

Of Counsel  
Leslie Horton Gladfelter

**Re: Lorraine Corners Owners' Association, Inc.  
N04000002382**

To Whom It May Concern:

Enclosed please find a Cover Letter signed by the new Registered Agent along with the Articles of Amendment to Articles of Incorporation of Lorraine Corners Owners' Association, Inc. Please process at your earliest convenience.

Thank you.

GRIMES HAWKINS GLADFELTER &  
GALVANO, P.L.

By: 

Pamela Montesinos, Assistant to Derin Parks, Esq.

2023 Sep 13 PM 1:12

/pm  
Enclosure

cc: Michael P. Infanti, Esq (via email, w/enclosure)

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: LORRAINE CORNERS OWNERS' ASSOCIATION, INC.

DOCUMENT NUMBER: N04000002382

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

Please return all correspondence concerning this matter to the following:

MICHAEL P. INFANTI, ESQ.

(Name of Contact Person)

INFANTI LAW, PLLC

(Firm/ Company)

1605 MAIN STREET, SUITE 1112

(Address)

SARASOTA, FL 34236

(City/ State and Zip Code)

MINFANTI@ILFPLLC.COM

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

For further information concerning this matter, please call:

MICHAEL P. INFANTI

941

289-3929

(Name of Contact Person)

at

(Area Code)

(Daytime Telephone Number)

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

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

Mailing Address  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

9/28/2013 PM 1:12

Articles of Amendment  
to  
Articles of Incorporation  
of

LORRAINE CORNERS OWNERS' ASSOCIATION, INC.

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

N04000002382

(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:

5391 LAKEWOOD RANCH BLVD., SUITE 100

(Principal office address MUST BE A STREET ADDRESS) SARASOTA, FL 34240

C. Enter new mailing address, if applicable:

5391 LAKEWOOD RANCH BLVD., SUITE 100

(Mailing address MAY BE A POST OFFICE BOX)

SARASOTA, FL 34240

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:

MICHAEL P. INFANTI, ESQ.

1605 MAIN STREET, SUITE 1112

(Florida street address)

New Registered Office Address:

SARASOTA

(City)

Florida 34236

(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

Michael Infanti, Jr. President

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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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>DS</u>	<u>DEBORAH BYERLY</u>	<u>14400 COVENANT WAY</u> <u>LAKEWOOD RANCH, FL 34202</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>DP</u>	<u>KIRK BOYLSTON</u>	<u>14400 COVENANT WAY</u> <u>LAKEWOOD RANCH, FL 34202</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>DVPT</u>	<u>SCOTT J. ALMAND</u>	<u>14400 COVENANT WAY</u> <u>LAKEWOOD RANCH, FL 34202</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>DP</u>	<u>MATT DREWS</u>	<u>5391 LAKEWOOD RANCH BLVD</u> <u>SARASOTA, FL 34240</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>DVP</u>	<u>DAN MOYER</u>	<u>5391 LAKEWOOD RANCH BLVD</u> <u>SARASOTA, FL 34240</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>DS</u>	<u>EUGENE STREETT</u>	<u>5391 LAKEWOOD RANCH BLVD</u> <u>SARASOTA, FL 34240</u>

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

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

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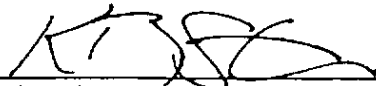
Effective date if applicable: SEPTEMBER 6, 2023  
(no more than 90 days after amendment file date)

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 SEPTEMBER 6, 2023

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)

Kirk Boylston  
(Typed or printed name of person signing)

President  
(Title of person signing)

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