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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

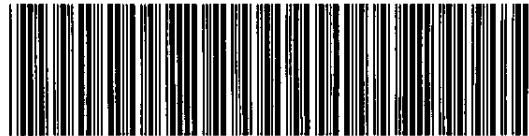
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Justin LaManna  
Advised to  
make all corrections

Office Use Only



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2015 OCT 20 PM 3:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R A / R O / chg

OCT 20 2015  
I ALBRITTON

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Old Winter Garden Road Commerce Center, *A Condominium Association Inc.*  
Name of Corporation

**DOCUMENT NUMBER:** N04000004012

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:

Justin J. LaManna

Name of Contact Person

Homevest Management, Inc

Firm/Company

1300 E. Michigan St

Address

Orlando, FL 32806

City/State and Zip Code

Justin@Homevest.com

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

For further information concerning this matter, please call:

Justin J. LaManna

Name of Contact Person

at ( 407 ) 897-5400

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 5, 2015

JUSTIN J. LAMANNA  
HOMEVEST MANAGEMENT, INC  
1300 E. MICHIGAN ST.  
ORLANDO, FL 32806

SUBJECT: OLD WINTER GARDEN ROAD COMMERCE CENTER, A  
CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: N04000004012

We have received your document for OLD WINTER GARDEN ROAD COMMERCE CENTER, A CONDOMINIUM 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):

The current name of the entity is as referenced above. Please correct your document accordingly.

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: 715A00011811

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Old Winter Garden Rd Commerce Center, A Condominium Association, Inc.  
2. The principal office address: 1300 E. Michigan St, Orlando, FL 32806

3. The mailing address (if different): same

4. Date of incorporation/qualification: 04/19/2004 Document number: N04000004012

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)

MYRICK, BRUCE C  
7749 MINNIE ROUSE LANE  
ORLANDO, FL 32835

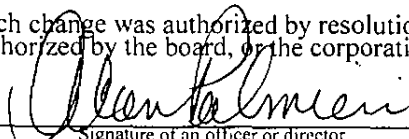
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Homevest Management, Inc c/o Justin J. LaManna  
1300 E. Michigan St  
Orlando, FL 32806

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

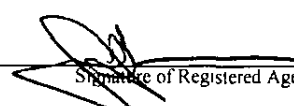
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Alan Palmieri, President

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.*

  
Signature of Registered Agent

5/15/2015

Date

If signing on behalf of an entity:

Justin J. LaManna

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 (03/12)

**FILED**  
**2015 OCT 20 PM 3:39**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA