

**NO4000006E11**

(Requestor's Name)

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(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

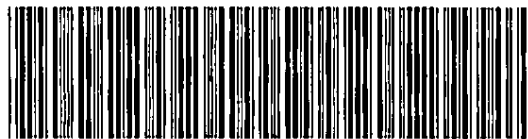
(Business Entity Name)

(Document Number)

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FILED  
18 MAY 24 PM 2:15  
TALLAHASSEE, FLORIDA

MAY 25 2018  
S. YOUNG

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: Oldfield Creek Estates Homeowners Association, Inc.  
Name of Corporation

DOCUMENT NUMBER: N04 000006011

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:

Paul Hutchins  
Name of Contact Person

Firma/Company

12203 Ambrosia Ct  
Address

Jacksonville FL 32223  
City/State and Zip Code

PmH12203@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Hutchins at (904) 476-4321  
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**

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

1. The name of the corporation: Oldfield Creek Estates Homeowners Association, Inc.
2. The principal office address: 12187 Ambrosia Ct  
Jacksonville FL 32223
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 6/16/04 Document number: N04000006011
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)

Chris L Hone  
12187 Ambrosia Ct  
Jacksonville FL 32223

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

Paul Hutchins  
12203 Ambrosia Ct  
Jacksonville FL 32223

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.

Tony Hassert  
Signature of an officer or director

Tony Hassert, 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.*

Paul Hutchins  
Signature of Registered Agent

May 14, 2018  
Date

If signing on behalf of an entity:

Paul Hutchins  
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  
CR2B045 (03/12)

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