

# No 4340

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

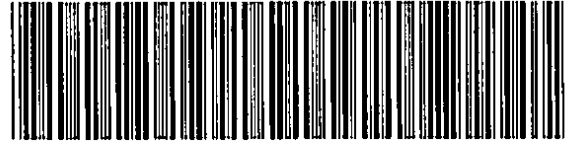
\_\_\_\_\_  
(Document Number)

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*need signature*

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FILED  
JAN 17 2019  
19 021 20 AM 11:21

R. WHITE

JAN 9 4 2019

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: THE HERITAGE HOMEOWNERS ASSOCIATION, INC.  
Name of Corporation

DOCUMENT NUMBER: N04340

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:

Erum S. Kistemaker

Name of Contact Person

Chiumento Dwyer Hertel Grant & Kistemaker

Firm/Company

120 E. Granada Blvd

Address

Ormond Beach, FL 32176

City/State and Zip Code

ekistemaker@legalteamforlife.com

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

For further information concerning this matter, please call:

Erum S. Kistemaker

Name of Contact Person

386 310-7997

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

January 4, 2019

THE HERITAGE HOMEOWNERS ASSOCIATION, INC  
1551 HERITAGE LANE  
HOLLY HILL, FL 32117

SUBJECT: THE HERITAGE HOMEOWNERS ASSOCIATION, INC.  
Ref. Number: N04340

We have received your document for THE HERITAGE HOMEOWNERS 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):

Please have Cyndi Hower Clark sign the application.

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) 248-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 419A00000215

RECEIVED  
2019 JAN 13 AM 11:32  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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: The Heritage Homeowners Association, Inc.
2. The principal office address: REVERE LANE, HANCOCK LANE, FRANKLIN CIR. HERITAGE LANE  
HOLLY HILL, FL 32117
3. The mailing address (if different): 1551 HERITAGE LANE  
HOLLY HILL, FL 32117
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: \_\_\_\_\_
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)

Glenda Stephens (Resigned)

1555 Hancock Lane

Holly Hill, FL 32117

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

Erum S. Kistemaker

120 E. Granada Blvd

P.O. Box NOT acceptable

Ormond Beach, FL 32176

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.

Cyndi Hower Clark  
Signature of an officer or director

Cyndi Hower Clark

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.

E S K

Signature of Registered Agent

12.12.18

Date

If signing on behalf of an entity:

Erum S. Kistemaker

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

18 DEC 20 AM 11:21