

N05000003278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

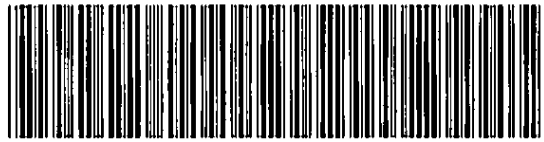
(Document Number)

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

Special Instructions to Filing Officer:

1351 544

Office Use Only



800342278788

04/29/20--01010--001 \*\*35.00

FILED  
2020 MAY 11 P 1:43

R7CH  
05/12/20  
DL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 22, 2020

TAMMY HARDT  
2113 RUBY RED BLVD.  
STE. B  
CLERMONT, FL 34714

SUBJECT: VISTA GRANDE HOMEOWNERS' ASSOCIATION, INC.  
Ref. Number: N05000003278

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Darlene Connell  
Regulatory Specialist II Supervisor

Letter Number: 820A00008431

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Vista Grande Homeowners Association, Inc  
Name of Corporation

**DOCUMENT NUMBER:** N05000003278

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:

Tammy Hardt

Name of Contact Person

Extreme Management Team

Firm/Company

2113 Ruby Red Blvd, Suite B

Address

Clermont, FL 34714

City/State and Zip Code

Tammy@hoacmt.com

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

For further information concerning this matter, please call:

Tammy Hardt

Name of Contact Person

at (716)

244-0643

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

1. The name of the corporation: Vista Grande Homeowners' Association, Inc.
2. The principal office address: 2113 Ruby Red Blvd, Suite B, Clermont, FL 34714
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 3/24/2005 Document number: N05000003278
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)

Dann, Lori

1631 E. Vinc Street, Suite #300

Kissimmee, FL 34744

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

Extreme Management Team LLC

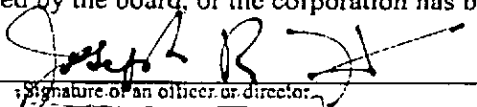
2113 Ruby Red Blvd, Suite B

P.O. Box NOT acceptable

Clermont, FL 34714

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

Joseph R. House

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

11/20/2019

Date

If signing on behalf of an entity:

Tammy Hardt

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 (04/13)