

N05000004477

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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*Amend.*

*10/10/12*

*DC*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Lone Pine Property Owners Association

DOCUMENT NUMBER: N0500000 4477

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

Please return all correspondence concerning this matter to the following:

Susan BAUSER

(Name of Contact Person)

(Firm/ Company)

1321 Lone Pine Drive

(Address)

Fort Pierce, FL 34982

(City/ State and Zip Code)

Susie Gem 3 @ bellsouth.net

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

For further information concerning this matter, please call:

David M. Heffelfinger at 772 342-6188

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

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

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is  
Enclosed)

**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

Articles of Amendment  
to  
Articles of Incorporation  
of

Lone Pine Property Owners Association, Inc.

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

NO5000004477

(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:

N/A

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:

(Principal office address **MUST BE A STREET ADDRESS**)

c/o 1321 Lone Pine Drive  
Ft. Pierce  
Fl. 34982

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

c/o Susan BARBER  
1321 Lone Pine Drive  
Ft. Pierce, Fla. 34982

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:

DAVID M. Heffelfinger  
1009 W. 1<sup>st</sup> Street

(Florida street address)

New Registered Office Address:

Ft. Pierce, Florida 34982  
(City) (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]  
Signature of New Registered Agent, if changing

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JACKSONVILLE, FLORIDA

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>

Type of Action  
(Check One)

Title

Name

Address

- 1) ☐ Change PD Kevin G. Broley 955 N.W. 17<sup>th</sup> Ave, Unit E  
Delray Beach  
Fl. 33445  
☐ Add  
☒ Remove
- 2) ☐ Change TD Ronald R. Hoffman 955 NW 17<sup>th</sup> Ave, Unit E  
Delray Beach  
Fl. 33445  
☐ Add  
☒ Remove
- 3) ☐ Change SD Carl R. Gockman 955 NW 17<sup>th</sup> Ave, Unit E  
Delray Beach  
Fl. 33445  
☐ Add  
☒ Remove
- 4) ☐ Change PD David M. Heffelfinger 1009 W. 1<sup>st</sup> Street  
Ft. Pierce  
Fl. 34982  
☒ Add  
☐ Remove
- 5) ☐ Change TD Glen R. Sapp 1413 Lone Pine Drive  
Ft. Pierce  
Fl. 34982  
☒ Add  
☐ Remove
- 6) ☐ Change SD Susan Barber 1321 Lone Pine Drive  
Ft. Pierce  
Fl. 34982  
☒ Add  
☐ Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: \_\_\_\_\_

August 2<sup>nd</sup>, 2012

Effective date if applicable: \_\_\_\_\_

August 2, 2012

(no more than 90 days after amendment/file date)

Adoption of Amendment(s)

(CHECK ONE)

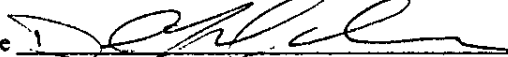
☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ 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

AUGUST 2<sup>ND</sup> 2012

✓ 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)

David M. Heffelfinger

(Typed or printed name of person signing)

President / Director

(Title of person signing)