

N05000005235

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2016 JUL 27 PM 6:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

AUG 05 2016  
C. CARROTHERS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 21, 2016

BECKY RITCHIE  
AEGIS COMMUNITY MANAGEMENT SOLUTIONS INC  
8390 CHAMPIONSGATE BLVD STE 304  
CHAMPIONSGATE, FL 33896

SUBJECT: ESTATES OF AUBURNDALE HOMEOWNERS ASSOCIATION, INC.  
Ref. Number: N05000005235

We have received your document for ESTATES OF AUBURNDALE 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):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's 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.

Cathy A Carrothers  
Regulatory Specialist

Letter Number: 416A00015279

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Estates of Auburndale Homeowners Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N05000005235

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:

**Becky Ritchie**

Name of Contact Person

Aegis Community Management Solutions, Inc.

Firm/Company

8390 Championsgate Blvd. Suite 304

Address

Championsgate, FL 33896

City/State and Zip Code

**britchie@aegiscms.com**

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

For further information concerning this matter, please call:

**Becky Ritchie**

Name of Contact Person

at **863** 256-5052 ext. 233

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: Estates of Auburndale Homeowners Association, Inc.  
2. The principal office address: 8390 Championsgate Blvd. Suite 304  
Championsgate, FL 33896  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 5-19-2005 Document number: N05000005235

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)

Brett M Jordan

882 Jackson Ave

Winter Park, FL 32789

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

Aegis Community Management Solutions, Inc.

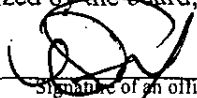
8390 Championsgate Blvd., Suite 304

P.O. Box NOT acceptable

Championsgate, FL 33896

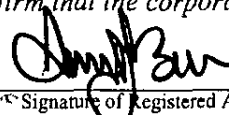
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

William Fox  
\_\_\_\_\_  
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

8-1-16  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

David Burman

Typed or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*