

NO5002207129

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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06/02/17--01011--024 **52.50

JUN 13 2017
S. YOUNG

FILED
17 JUN -2 PM 3:04
STATE OF FLORIDA
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 12, 2017

DONALD WSCHOFIELD
610 HAVENS CORNERS ROAD
GAHANNA, OH 43230

SUBJECT: EMERALD COAST YACHT CLUB SUBDIVISION HOMEOWNERS'
ASSOCIATION, INC.
Ref. Number: N05000007129

We have received your document for EMERALD COAST YACHT CLUB SUBDIVISION HOMEOWNERS' ASSOCIATION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 817A00011798

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: EMERALD COAST YACHT CLUB SUBDIVISION HOMEOWNERS ASSOCIATION, INC.
DOCUMENT NUMBER: N0500000 7129

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

Please return all correspondence concerning this matter to the following:

DONALD W. SCHOFIELD

Name of Contact Person

Firm/ Company

610 HAVENS FORDERS ROAD

Address

Gahanna, Ohio 43230

City/ State and Zip Code

LTNicle@hotmail.com

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

For further information concerning this matter, please call:

DONALD W. SCHOFIELD

Name of Contact Person

at (614) 371-4431

Area Code & Daytime Telephone Number

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

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

FILED
17 JUN -2 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Emerald coast yacht club subdivision homeowners Association
(Name of Corporation as currently filed with the Florida Dept. of State) *INC*

N05000087129

(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:

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)

610 Havens corners Rd
Gahanna, Oh 43230

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

610 Havens corners Rd
Gahanna, Oh 43230

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:

DONALD W. Schofield

502 EMERALD coast Dr
(Florida street address)

New Registered Office Address:

PANAMA CITY
(City)

Florida 32404
(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

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:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

- 1) ☐ Change P Donald W Schofield 610 Havens Corners Rd
☒ Add Gahanna, OH 43230
☐ Remove _____
- 2) ☐ Change D Tim Greene 265 Lake Summit View
☐ Add Atlanta, GA 30342
☒ Remove _____
- 3) ☐ Change D Cheryl Kloser 32 English Ivy Way
☐ Add Ackworth, GA 30101
☒ Remove _____
- 4) ☐ Change D Wayne Greene 265 Lake Summit View
☐ Add Atlanta, GA 30342
☒ Remove _____
- 5) ☐ Change VP John Quang Le 502 Emerald Coast Dr.
☒ Add Panama City, FL 32404
☐ Remove _____
- 6) ☐ Change SEC Nicole T Le 610 Havens Corners Rd
☒ Add Gahanna, Ohio 43230
☐ 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: _____, if other than the date this document was signed.

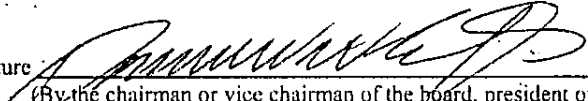
Effective date if applicable: 05/30/17
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 ~~05/30~~ 06/13/2017

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)

DONALD W. Schofield
(Typed or printed name of person signing)

president
(Title of person signing)