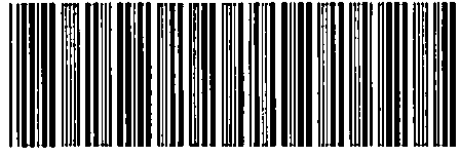


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FALL ARK/REGISTRATION

OCT 28 2019

7 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HARRISON RANCH HOMEOWNERS' ASSOCIATION, INC.

Name of Corporation

DOCUMENT NUMBER: N05000010146

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:

BARBARA McEVOY

Name of Contact Person

HARRISON RANCH

Firm/Company

5755 HARRISON RANCH BLVD

Address

PARRISH, FL 34219

City/State and Zip Code

bmcevoy@rizzetta.com

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

For further information concerning this matter, please call:

Barbara McEvoy

Name of Contact Person

at (**941**) **776-9725**

Area Code & Daytime Telephone Nu

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

BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, a 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: Harrison Ranch Homeowners' Association, Inc.

2. The principal office address: 5755 Harrison Ranch Blvd, Parrish, FL 34219

3. The mailing address (if different): Same as above

4. Date of incorporation/qualification: 9/30/05 Document number: N050000101

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)

Burton, Leah K. Esq.

1800 Second Street, Suite 808

Sarasota, FL 34236

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

Barbara McEvoy, Manager

5755 Harrison Ranch Boulevard

P.O. Box NOT acceptable

Parrish, FL 34219

SECTION 607.0502
FALL 19 OCT 7 AM 9:50

19 OCT -7 AM 9:50

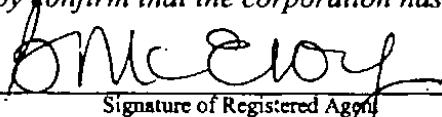
The street address of its registered office and the street address of the business office of its register as changed will be identical.

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

Thomas Benton, President
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 hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

8/26/19

Date

If signing on behalf of an entity:

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