

NO60000000261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TO: Amendment Section
Division of Corporations

SUBJECT: BRECKENRIDGE LANDOWNERS ASSN. INC.
Name of Corporation

DOCUMENT NUMBER: NO600000000261

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:

DEWSE PRESCOTT
Name of Contact Person

BRECKENRIDGE LANDOWNERS ASSOC. INC.
Firm/Company

1163 GALWAY BLVD.
Address

APOPKA, FL 32703
City/State and Zip Code

BRECKAPOPKAHOA@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEWSE PRESCOTT at (407) 506-6956
Name of Contact Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2017

DENISE PRESCOTT
1163 GALWAY BLVD
APOPKA, FL 32703

SUBJECT: BRECKENRIDGE LANDOWNERS ASSOCIATION, INC.
Ref. Number: N06000000261

We have received your document for BRECKENRIDGE LANDOWNERS 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 registered agent must sign accepting the designation.

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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 517A00024063

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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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: Breckenridge Landowners Assn. Inc.
2. The principal office address: 1163 Galway Blvd. - Apopka, FL 32703
3. The mailing address (if different): P.O. Box 686
Plymouth, FL 32768-0686
4. Date of incorporation/qualification: _____ Document number: _____
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)

Sentry Mgmt. Inc.

2180 West SR 434 Ste 5000

Longwood, FL 32779

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

Denise Prescott

1163 Galway Blvd.

P.O. Box NOT acceptable

Apopka, FL 32703

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.

Denise Prescott
Signature of an officer or director

Denise Prescott-Secretary
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.

Denise Prescott
Signature of Registered Agent

11/20/17

Date

If signing on behalf of an entity:

Breckenridge Landowners Assn

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