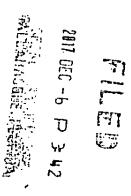
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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## **COVER LETTER**

Division of Corporations		
SUBJECT: BRECKENRIDGE CANDOWNERS ASSNIC.  Name of Corporation		
DOCUMENT NUMBER: DOCODOOOOOOOO		
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:		
DEDISE PIZESCOTT  Name of Contact Person		
BRECKEURIOGE CANDOLUDERS ASSOC. I DC. Firm/Company		

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

For further information concerning this matter, please call:

DENISE PRESCOTT at (407) 506-G956

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

TO:

Amendment Section



## 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

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organiz in order to change its registered office or register	zed under the laws of 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.	2	
Apopka, FL 32703	ecceptable	
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		
Device Lucatt 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.		
Weich Luccott Signature of Registered Agent	11/20/17	
If signing on behalf of an entity:		
Breckenridge Landowners Assn		

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

Typed or Printed Name