

N06000004271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

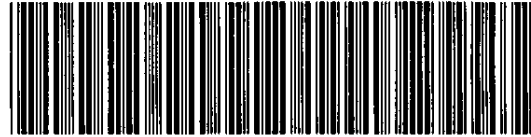
(Document Number)

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18 FEB 22 PM 2:04  
REGISTRATION  
DIVISION  
OTTAWA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 8, 2018

ANNE HERSTOL  
HILLSIDE VILLAGE CONDOMINIUM ASSOCIATION  
23 N. HILLSIDE AVE  
ORLANDO, FL 32803

SUBJECT: HILLSIDE VILLAGE CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: N06000004271

We have received your document for HILLSIDE VILLAGE CONDOMINIUM ASSOCIATION, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$105.00.

EACH OF THE THREE (3) FORMS SUBMITTED REQUIRE A FEE OF \$35.00 EACH, TOTALING \$105.00, OR YOU MAY CHOOSE TO SUBMIT THE NOT FOR PROFIT ARTICLES OF AMENDMENT FORM ATTACHED FOR A TOTAL OF \$35.00 TO REMOVE OFFICERS/DIRECTOR AND CHANGE REGISTERED AGENTS.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 818A00002720

RECEIVED  
18 FEB 20 PM 4 33  
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Hillside Village Condominium Association, Inc.  
2. The principal office address: 23 N. Hillside ~~Way~~ Ave  
Orlando, FL 32803  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 4/18/2006 Document number: NO 6000004271

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)

Audra E. Bussey (Resigned)

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

Anne Herstol  
23 N Hillside ~~Way~~ Ave  
Orlando, FL 32803  
P.O. Box NOT acceptable

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.

Anne Herstol  
Signature of an officer or director

Anne HERSTOL, 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, I hereby confirm that the corporation has been notified in writing of this change.*

Anne Herstol  
Signature of Registered Agent

1/30/18  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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