

N06953

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

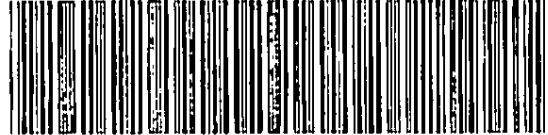
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*[Signature]*

Office Use Only



300324632493

03/01/19--01007--013 ++43.15

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 MAR 20 AM 10:52

*Amund*

MAR 23 2019

D CUSHING

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: STRAWBERRY RIDGE HOMEOWNERS ASS

DOCUMENT NUMBER: 1106953

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

Please return all correspondence concerning this matter to the following:

THOMAS BECKMEYER

(Name of Contact Person)

STRAWBERRY RIDGE HOMEOWNERS ASSOC

(Firm/ Company)

509 STRAWBERRY RIDGE BLVD

(Address)

VALRICO FL 33594

(City/ State and Zip Code)

TOM BECKMEYER.TB@GMAIL.COM

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

For further information concerning this matter, please call:

Tom Beckmeyer

(Name of Contact Person)

at 813 601 5331

(Area Code) (Daytime Telephone Number)

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

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$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

RECEIVED  
19 MAR 20 AM 10:52  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 9, 2019

THOMAS BECKMEYER  
STRAWBERRY RIDGE HOMEOWNERS ASSOCIATION  
509 STRAWBERRY RIDGE BLVD  
VALRICO, FL 33544

SUBJECT: STRAWBERRY RIDGE HOMEOWNERS ASSOCIATION, INC.  
Ref. Number: N06953

We have received your document for STRAWBERRY RIDGE HOMEOWNERS ASSOCIATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a Florida Non-Profit Corporation.. Please complete and return the enclosed blank form(s).

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.

Diane Cushing  
Senior Section Administrator

Letter Number: 919A00004793

RECORDING PAPERWORK

RECEIVED

2019 MAR 20 AM 10:56

CLERK OF COURT

Articles of Amendment  
to  
Articles of Incorporation  
of

STRAWBERRY RIDGE HOMEOWNERS ASSOC.

(Name of Corporation as currently filed with the Florida Dept. of State)

NO6953

(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:

NA

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:

NA

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NA

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:

NA

NA

(Florida street address)

New Registered Office Address:

NA

Florida

(City)

(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.

NA

Signature of New Registered Agent, if changing

FILED  
CLERK OF STATE  
DIVISION OF CORPORATIONS  
19 MAR 20 AM 10:52

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>    </u> Change <u>X</u> Add <u>    </u> Remove	<u>P</u>	<u>Thomas Beckmeyer</u>	<u>3632 Whistle Stop LA</u> <u>VALRICO, FL 33594</u>
2) <u>    </u> Change <u>X</u> Add <u>    </u> Remove	<u>VP</u>	<u>Terry Brown</u>	<u>3514 Meteoriz. Pl</u> <u>VALRICO, FL 33594</u>
3) <u>    </u> Change <u>X</u> Add <u>    </u> Remove	<u>T</u>	<u>Sharon McHenry</u>	<u>230 Choo Choo Pl</u> <u>VALRICO, FL 33594</u>
4) <u>    </u> Change <u>X</u> Add <u>    </u> Remove	<u>S</u>	<u>Jean DiBeneditto</u>	<u>120 Choo Choo Pl</u> <u>VALRICO, FL 33594</u>
5) <u>    </u> Change <u>X</u> Add <u>    </u> Remove	<u>D</u>	<u>Carol Pitman</u>	<u>402 Coast Line Ln</u> <u>VALRICO, FL 33594</u>
6) <u>    </u> Change <u>X</u> Add <u>    </u> Remove	<u>D</u>	<u>Fred Pollman</u>	<u>604 Kickerly Klack</u> <u>VALRICO, FL 33594</u>

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action  
(Check One)

Title

Name

Address

- |  |          |                         |   |
|--|----------|-------------------------|---|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>D</u> | <u>BECK, KATHY</u>      | <u>115 STRAWBERRY JCT</u><br><u>VALRICO, FL 33594</u>   |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>V</u> | <u>BECK KATHY</u>       | <u>115 STRAWBERRY JCT</u><br><u>VALRICO, FL 33594</u>   |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>S</u> | <u>Vilchez VICTORIA</u> | <u>3529 WHISTLE STOP LN</u><br><u>VALRICO, FL 33594</u> |
| 4) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | _____    | _____                   | _____   |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | _____    | _____                   | _____   |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | _____    | _____                   | _____   |

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:

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

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>U</u>	<u>DEBBIE LABLANC</u>	<u>105 STRAWBERRY JUNCT</u> <u>VALRICO, FL 33594</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

[illegible]



The date of each amendment(s) adoption: MARCH 1, 2019, if other than the date this document was signed.

Effective date if applicable: MARCH 1, 2019  
*(no more than 90 days after amendment file date)*

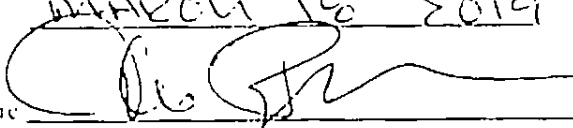
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

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 MARCH 19, 2019

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)

THOMAS BECKMEYER  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)