## N0100000 4659

(Red	questor's Name)	
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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORP	ORATION: Regal Oaks at	Old To	wn Owners' Asso	ociation, Inc.
DOCUMENT NU	MBER: N07000004659	r. 7		
The enclosed Artic	les of Amendment and fee are sub	mitted for	filing.	
Please return all co	rrespondence concerning this matt	er to the fo	llowing:	
	Johr	n P. Juno	d	
	(Name of	Contact Pe	erson)	
	Godbold, Downin			
	(Firm	/ Company	r)	
	222 W. Comstoo		e, Suite 101	<del></del>
	(A	(ddress		
	Winter Par		1.775	
	(City/ Stat	e and Zip (	Lode)	
	E-mail address: (to be used	for future	annual report notificati	ion)
For further informa	tion concerning this matter, please	call:		
John P. Junod		at (	407 <sub>)</sub> 647-4418	
	ne of Contact Person)	at (	(Area Code & Daytime	
Enclosed is a check	for the following amount made pa	ayable to tl	ne Florida Department o	of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certific	75 Filing Fee & ed Copy ional copy is ed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	celling Address bendment Section rision of Corporations D. Box 6327 lahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	s

## **Articles of Amendment** · to **Articles of Incorporation**

of

Regal Oaks at Old Tov	vn Owners'	Association, Inc.	100 OS
(Name of Corporation as curre	ntly filed with	the Florida Dept. of State	
N070	00004659		1000
(Document Num	ber of Corporati	ion (if known)	
Pursuant to the provisions of section 617.1006, I the following amendment(s) to its Articles of Inc.  A. If amending name, enter the new name of	corporation:		it Corporation add
The new name must be distinguishable and co abbreviation "Corp." or "Inc." "Company" or			orated" or the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		11315 Corporate Blvd.	
		Suite 250	
		Orlando, Florida 328	17
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11315 Corporate Blvc	<u>l </u>
		Suite 250	
		Orlando, Florida 32817	
D. If amending the registered agent and/or renew registered agent and/or the new registered.			the name of the
Name of New Registered Agent:	Car	ndice Hawks	
New Registered Office Address:	<del></del>	orate Blvd., Suite 250	
	ı	Orlando	Florida 32817

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.

Signature of New Registered Agent, if changing

(City)

(Zip Code)

## 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
D.	Richard Wilkes	2700 Sand Mine Rd	☐ Add
		Davenport, FL 33897	☐ Remove
Pres.	Colby Franks	11315 Corporate Blvd.	
		Suite 250	Remove
		Orlando, FL 32827	
VP	Candice Hawks	11315 Corporate Blvd.	🗹 Add
*600	additional sheet attached.	Suite 250	Remove
- See	additional sheet attached.	Orlando, FL 32817	
	mending or adding additional Articles, enter ach additional sheets, if necessary). (Be spec		
		110-11-110-1	
<del></del>			
			***
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The date of each amendmen	t(s) adoption: July 10, 2009
	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated	19/09 Tandro L. Lland
(B)	the chairman or vice chairman of the board, president or other officer-if directors or not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Candice Hawks
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)

TitleNameAddressType of ActionSec/TresLisa Feuerman11315 Corporate Blvd.<br/>Suite 250<br/>Orlando, FL 32817
□ Remove