

N07000007Z12

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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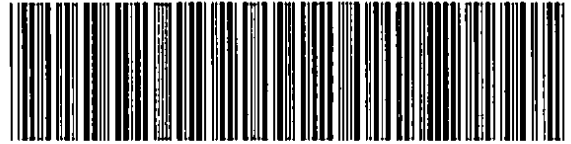
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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3/18/20

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Equestrian Springs Owners Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N07000007212

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:

Hellena Smejda

Name of Contact Person

Equestrian Springs Owners Association, Inc.

Firm/Company

c/o Smejda

Address

2121 NE 40th Avenue, Ocala, FL 34470

City/State and Zip Code

hellenas@mac.com

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

For further information concerning this matter, please call:

Hellena Smejda

Name of Contact Person

at (352) 351-9262

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: Equestrian Springs Owners Association, Inc.
2. The principal office address: 4701 NE 100th Street, Ocala, FL 34482
3. The mailing address (if different): c/o Smejda, 2121 NE 40th Ave, Ocala, FL 34470-3176
4. Date of incorporation/qualification: 2007-07-20 Document number: N07000007212
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)

International Center

150 SE 2nd Ave, Suite 304 (was Suite 1002)

Miami, FL 33131

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

John C. Trentelman

328 NE 1ST AVE SUITE 100

P.O. Box NOT acceptable

OCALA, FL 34470 US

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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.

Hellena Smejda  
Signature of an officer or director

Hellena Smejda, Director

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.*

John C. Trentelman (H)  
Signature of Registered Agent

3-2-20

Date

If signing on behalf of an entity:

John C. Trentelman

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  
CR2E045 (04/13)