

NO80000002403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

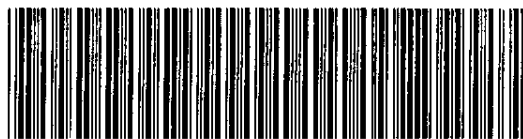
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200201996652

04/18/11--01018--010 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR 27 PM 1:40

RA
RD/chs
@ 4.28.11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Villa de LaGuna Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N08000002403

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:

JEAN G. PAILET, Treasurer
Name of Contact Person

Villa de LaGuna Homeowners Association, Inc.
Firm/Company

1326 SANTA ROSA COURT
~~P.O. BOX 1021~~
Address

32159
Lady Lake, FL ~~32158-1021~~
City/State and Zip Code

kayakp@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jean G. Pailet, Treasurer at (352) 259-3963
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 19, 2011

JEAN G. PAILET
VILLA DE LAGUNA HOMEOWNERS
P.O. BOX 1021
LADY LAKE, FL 32158-1021

SUBJECT: VILLA DE LAGUNA HOMEOWNERS ASSOCIATION, INC.
Ref. Number: N08000002403

We have received your document for VILLA DE LAGUNA HOMEOWNERS 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):

- * A post office box is not an acceptable address for the registered agent.
- * 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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 811A00009421

* PLEASE SEE ATTACHED AMENDED DOCUMENT *JLP*

**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: Villa De LaGuna Homeowners Association, Inc.
2. The principal office address: ~~P.O. Box 1021~~ 1324 Santa Rosa Court
~~Lady Lake, Florida 32158-1021~~ lady lake, FL 32159
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/10/08 Document number: N08000002403

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)

Eileen V. Bauer, Treasurer

1316 Santa Rosa Court

Lady Lake, Florida 32159

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

Jean G. Paillet, Treasurer

~~P.O. Box 1021~~

1326 SANTA ROSA COURT

P.O. Box NOT acceptable

Lady Lake, Florida ~~32158-1021~~ 32159

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

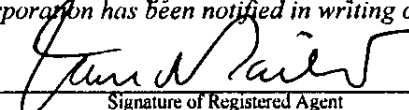
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Harold Wiechman, 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.


Signature of Registered Agent

4/15/11
Date

If signing on behalf of an entity:

Villa De LaGuna Homeowners Association, Inc.

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 (8/05)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR 27 PM 1:40