

N090000004844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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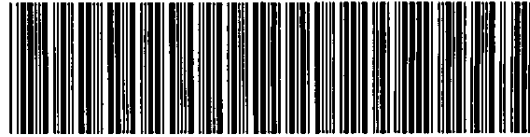
(Business Entity Name)

(Document Number)

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13 NOV -4 PM 3:43

NOV -7 2013
T. CARTER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TROPIC HILLS HOMEOWNERS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: NO9000004844

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:

John GAUNT
Name of Contact Person

TREASURER, TROPIC HILLS HOMEOWNERS ASSOCIATION, INC.
Firm/Company

1283 Edenville Ave
Address

CLEARWATER, FL 33764
City/State and Zip Code

ACCORDEON @ AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John GAUNT at 127, 417 6099
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

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: Tropic Hills Homeowners Association, Inc
2. The principal office address: 1283 Edenville Ave
CLEARWATER FL 33764
3. The mailing address (if different): _____

4. Date of incorporation/qualification: MAY 15, 2009 Document number: NO9000004844

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)

BACON, DAVID AFSR
2959 First Avenue North
St. Petersburg, FL 33713

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

John GAUNT, TREASURER
1283 Edenville Ave
CLEARWATER, FL 33764

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.

John Gaunt John Gaunt, TREASURER
Signature of an officer or 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 Gaunt 10/22/13
Signature of Registered Agent Date

If signing on behalf of an entity:

John GAUNT
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 (03/12)

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