N09000010694

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	; #)
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EXAMINER



JOHN W. ARNETT**
M. THOMAS BOND, JR.
RAUL CARRERAS, JR.*
ANN MELINDA CRAGGS
WILLIAM H. PHELAN, JR.
MARTY SMITH

101 SOUTHWEST THIRD STREET POST OFFICE BOX 2405 OCALA, FLORIDA 34478 Telephone (352) 622-1188

FACSIMILE (352) 622-1125

*BOARD CERTIFIED REAL ESTATE LAWYER

+ OF COUNSEL

October 18, 2010

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

Shell Pond Plantation Owner's Association, Inc.

Doc. No.: N09000010694

To whom it may concern:

Our firm represents that the above corporation. Enclosed please find our firm check, number 51690, in the amount of \$140.00 for payment of the filing fees for the following:

- 1. Articles of Amendment;
- 2. Resignation of Registered Agent;
- 3. Resignation of Officer (Wade Bullock); and
- 4. Resignation of Officer (Kennedy Boyer, Sr.).

Please feel free call me if you need anything else, or if you have any questions.

Sincerely,

BOND, ARNETT, PHELAN, SMITH& CRAGGS, P.A.

Patti Eining, Paralegal to

Marty Smith

CMS/p Encls.

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Shell Pond	Plantation Property Owner	s Association	
DOCUMENT NU	MBER:	N09000010694		
The enclosed Artic	les of Amendment and fee ar	re submitted for filing.		
Please return all co	rrespondence concerning this	s matter to the following:		
		Ruth Taber		
	Na	ame of Contact Person		
Firm/ Company				
P.O. Box 715				
Address				
Williston, FL 32696 City/ State and Zip Code				
	ruthtaber(E-mail address: (to be used	@embarqmail.com I for future annual report notification)		
For further informa	ation concerning this matter,	please call:		
	Patti Eining	at \	2-1188	
Name	of Contact Person	Area Code & Daytime Telep	bhone Number	
Enclosed is a check	k for the following amount m	ade payable to the Florida Departn	nent of State:	
	\$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

Articles of Amendment

to

Articles of Incorporation

of

Shell Pond Plantation Property Owner's Association, Inc.

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

N	Λa	nn	nn	10	694
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(Document Number of Corporation (if known)

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NIH				The .	
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or t name must contain the word "chartered," "p	he designation "C	orp," "Inc," or "Co". A p	professional cor	' or pora	the ition
B. Enter new principal office address, if applicable:		15205 W. Hwy 316			
(Principal office address <u>MUST BE A STRI</u>	<u>EET ADDRESS</u>)	Williston, FL 32696	*******		12.4
				000	37£
C. Enter new mailing address, if applicab	ale.			7 =	- A
(Mailing address MAY BE A POST OF)		P.O. Box 715		9	(C) (S)
	•			7	- 27
		Williston, FL 32696			- 100 C
		Williston, FL 32696		AM II:)RATION
D. If amending the registered agent and/o		address in Florida, enter t	the name of the	_)RATIONS
new registered agent and/or the new re	gistered office ad	address in Florida, enter t	the name of the	_) BATIONS
		address in Florida, enter t	the name of the	_	TOMS.
<u>Name of New Registered Agent</u> :	Ruth Taber 15205 West	address in Florida, enter t dress: Highway 316	the name of the	_)RATIONS
new registered agent and/or the new re	Ruth Taber 15205 West	address in Florida, enter t	the name of the	_)RATIONS
<u>Name of New Registered Agent</u> :	Ruth Taber 15205 West	address in Florida, enter to dress: Highway 316 ida street address)	the name of the	_)RATIONS

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>	<u>Address</u>	Type of Action
Pres	Edward Scott	1606 SW 86th Terrace Gainesville, FL 32607	☑ Add □ Remove
<u>Sec</u>	Ruth Taber	15205 W Highway 316 Williston, Ft. 32696	
Treas	Patricia Elliott	P.O. Box 195432 Winter Park, FL 32719	
	ding or adding additional Additional Additional sheets, if necessary	Articles, enter change(s) here: (Be specific)	
provisi (if		exchange, reclassification, or cancellation of mendment if not contained in the amendment	
N/A			

The date of each amendmen	t(s) adoption:	: 8/21/10
Effective date <u>if applicable</u> :	8/21/10	(date of adoption is required)
• -	(no more tha	an 90 days after amendment file date)
Adoption of Amendment(s)	((CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by ere sufficient f	the shareholders. The number of votes cast for the amendment(s) for approval.
		by the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the an	mendment(s) was/were sufficient for approval
by		." (p)
	(voting group	p)
action was not required.		the board of directors without shareholder action and shareholder the incorporators without shareholder action and shareholder
Dated/	0/8/10	1 1
Signature	Duch	h Vaber
(By	a diffector, pro-	resident or other officer – if directors or officers have not been acorporator – if in the hands of a receiver, trustee, or other court
		ary by that fiduciary)
		Ruth Taber
		(Typed or printed name of person signing)
		Secretary
	(Titl	le of person signing)

Amendment of Officers/Directors (Cont.)

<u>Title</u>	Name	Address	Type of Action
Dir.	Kennedy Boyer, Sr.	456 E. Noble Avenue Williston, FL 32696	Remove
Dir.	Wade Bullock	505 SW 7 th Street Williston, FL 32696	Remove
Dir.	Ruth Taber	152 SW 7 th Street Williston, FL 32696	Change to Sec.