

N13785

(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



000251526040

09/11/13--01012--009 \*\*35.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 SEP 11 PM 3:09

FILED

R/ACHg  
SEP 19 2013  
R. WHITE

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Greenwood Manor Condominium Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N13785

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:

Seth D. Chipman, Esq.

Name of Contact Person

Seth D. Chipman, P.A.

Firm/Company

96 Willard Street, Suite 204

Address

Cocoa, Florida 32922

City/State and Zip Code

schipmanlaw@cfl.rr.com

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

For further information concerning this matter, please call:

Seth D. Chipman, Esq. at 321 639-1300

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

**SETH D. CHIPMAN, P.A.**

Attorney at Law

96 Willard Street, Suite 204, Cocoa, FL 32922

Tel: 321-639-1300 ▪ Fax: 321-639-1303 ▪ Email: schipmanlaw@cfl.rr.com

---

September 6, 2013

**Via U.S. Mail**

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

**RE:   *Change of Registered Agent*  
          *Greenwood Manor Condominium Association, Inc.*  
          *Document No.: N13785***

To Whom It May Concern:

Enclosed are the forms for changing a registered agent along with a check for \$35.00 made out to The Florida Department of State.

Please process the requested change accordingly. Feel free to contact my office if you require anything further.

Sincerely,



Seth D. Chipman, Esq.  
SDC/tl  
Encl.

**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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Greenwood Manor Condominium Association, Inc.
2. The principal office address: 669 Greenwood Manor Circle, West Melbourne, FL 32904
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 3/11/86 ~~July 10, 1986~~ Document number: N13785

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)

John Soileau, Esq.  
3490 North Highway US 1  
Cocoa, Florida 32926

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

Seth D. Chipman, Esq.  
96 Willard Street, Suite 204  
P.O. Box NOT acceptable  
Cocoa, Florida 32922

FILED  
SEP 11 PM 3:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

Michael D. Uramkin  
Signature of an officer or director

Michael D. Uramkin, 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.*

Seth D. Chipman  
Signature of Registered Agent

9/6/13  
Date

If signing on behalf of an entity:

Seth D. Chipman  
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)