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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION		HILLSBOROUGH HON	4EOWNER	RS ASSOCIATION, INC.
DOCUMENT NUMBER:	N14000009883			
The enclosed Articles of Am	nendment and fee are sub	mitted for filing.		
Please return all corresponde	ence concerning this matt	er to the following:		
DAVID C. JACKSON				
		(Name of Contact Person	n)	
BALLENTRAE OF HILLS	BOROUGH HOMEOWI	NERS ASSOCIATION, I	NC.	
		(Firm/ Company)		
11843 VALHALLA WOOD	OS DRIVE			
		(Address)		
RIVERVIEW, FL 33579				
		(City/ State and Zip Cod	e)	
ditljackson@hotmail.com				
Е	-mail address: (to be use	d for future annual report	notification)
For further information conc	erning this matter, please	e call:		
DAVID C. JACKSON		(81 at	3)426-007	
	(Name of Contact Persor			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made p	ayable to the Florida Depa	artment of	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	ddress	Street	Address	

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



October 30, 2019

DAVID C. JACKSON 11843 VALHALLA WOODS DRIVE RIVERVIEW, FL 33579

SUBJECT: BALLENTRAE OF HILLSBOROUGH HOMEOWNERS

ASSOCIATION, INC.

Ref. Number: N14000009883

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 919A00022430 11/23/2018

corrected completed Jacoment 2018/10/27 PHID: 117

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

, ,

BALLENTRAE OF HILLSBOROUGH HOMEOWNERS ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N14000009883 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp," or "Inc." "Company" or "Co," may not be used in the name. 11843 Valhalla Woods Drive B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
Riverview, FL 33579 C. Enter new mailing address, if applicable: 11843 Valhalla Woods Drive (Mailing address MAY BE A POST OFFICE BOX) Riverview, FL 33579 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: David C. Jackson Name of New Registered Agent: 11843 Valhalla Woods Dr (Florida street address) New Registered Office Address: , Florida ³³⁵⁷⁹ Riverview (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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Signature of New Registered Agent, if changing

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>P</u>	WILLIE REYNOLDS JR	12512 BALLENTRAE FOREST D RIVERVIEW, FL 33579
× Remove			
2) Change Add	<u>v</u>	TREVOR D. PERSENAIRE	RIVERVIEW, FL 33579
x Remove 3) Change Add x Remove	<u>TS</u>	WILBUR BASS	12520 BALLENTRAE FOREST E RIVERVIEW, FL 33579
4) Change Add	PD	DAVID C. JACKSON	RIVERVIEW, FL 33579
Remove			
5) Change Add	<u>VD</u>	DAWN DRURY	11807 VALHALLA WOODS DR RIVERVIEW, FL 33579
Remove			
6) Change Add	<u>D</u>	EDWIN MALDONADO	11716 WINTERSET COVE DR RIVERVIEW, FL 33579
Remove			
E. If amending or addir (attach additional shee		Page 2 of 4 cles, enter change(s) here: (Be specific)	
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		11.4.4.4	

		
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	Page 3 of 4	
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The date of each amendment date this document was signed	(s) adoption:	, if other than the
Effective date if applicable:	11/24/2019	
Encenve date il applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.	

Dated	11/22/2019
Signatu	Din Co State
Signatui	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	DAVID C. JACKSON
	(Typed or printed name of person signing)
	PRESIDENT/BOARD OF DIRECTOR
	(Title of person signing)

• 🖹 There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.