

NI 4088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

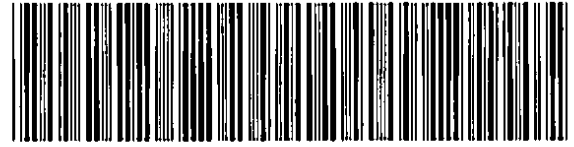
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

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2022 JUN -2 PM 1:50

2022 JUL -1 AM 9:47

RECEIVED OF
TALLAHASSEE, FLORIDA

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RA Change

*00789, 00524 00671

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

EAGLE CREEK VILLA HOMES NO 1...

2022 JUL -1 AM 9:17
EAGLE CREEK VILLA HOMES NO 1...

- ___ Art of Inc. File_____
- ___ LTD Partnership File_____
- ___ Foreign Corp. File_____
- ___ L.C. File_____
- ___ Fictitious Name File_____
- ___ Trade/Service Mark_____
- ___ Merger File_____
- ___ Art. of Amend. File_____
- ___ RA Resignation_____
- ___ Dissolution / Withdrawal_____
- ___ Annual Report / Reinstatement_____
- ___ Cert. Copy_____
- ___ Photo Copy_____
- ___ Certificate of Good Standing_____
- ___ Certificate of Status_____
- ___ Certificate of Fictitious Name_____
- ___ Corp Record Search_____
- ___ Officer Search_____
- ___ Fictitious Search_____
- ___ Fictitious Owner Search_____
- ___ Vehicle Search_____
- ___ Driving Record_____
- ___ UCC 1 or 3 File_____
- ___ UCC 11 Search_____
- ___ UCC 11 Retrieval_____
- ___ Courier_____

Signature _____

Requested by: SETH

06/29

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Eagle Creek Villa Homes No. 1 Neighborhood Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N14088

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:

Susan L. Bedyan

Name of Contact Person

Goede, DeBoest & Cross

Firm/Company

6609 Willow Park Drive, Second Floor

Address

Naples, FL 34109

City/State and Zip Code

lbosch@gadclaw.com

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

For further information concerning this matter, please call:

Susan L. Bedyan

Name of Contact Person

at (239) 331-5100

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED
2022 JUL -1 AM 9:47
TALLAHASSEE, FL
SECRETARY OF STATE

**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: Eagle Creek Villa Homes No. 1 Neighborhood Association, Inc.
2. The principal office address: C/o Eagle Creek Community Association, 746 Eagle Creek Drive, Unit 103,
Naples, FL 34113
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/28/1986 Document number: N14088
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)

Karen Kari

746 Eagle Creek Drive, Unit 103

Naples, FL 34113

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

Goede, DeBoest & Cross, PLLC

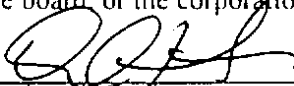
6609 Willow Park Drive, Second Floor

P.O. Box NOT acceptable

Naples, FL 34109

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

Drew Krimski, Association 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.

Lee-Anne Bosch

Signature of Registered Agent

06.30.2022

Date

If signing on behalf of an entity:

Lee-Anne Bosch

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 (04/13)