

1/14/2019

71500008167

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA00000023
Phone : (614)280-3338
Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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SECRETARY OF STATE
TALLAHASSEE FL

REGISTERED AGENT CHANGE

SUMMERVILLE RESORT HOMEOWNERS ASSOCIATION, INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

TALLAHASSEE, FLORIDA

2019 JAN 15 A 9 52

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JAN 16 2019

T. LEWIS

Handwritten signature/initials

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: SUMMERYVILLE RESORT HOMEOWNERS ASSOCIATION, INC.

2. The principal office address: 2621 SUNRISE SHORES DR Kissimmee, FL 34747

3. The mailing address (if different): C/O P.O. BOX 7023-48 DALLAS, TX 75370-2348

4. Date of incorporation/qualification: 08/18/2015 Document number: N15000008167

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)

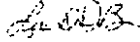
BENITEZ, GUS R
1223 EAST CONCORD STREET ORLANDO, FL 32803

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

CT Corporation System
c/o CT Corporation System, 1200 South Pine Island Road
Plantation, Florida 33324
P.O. Box NOT acceptable

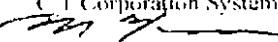
The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Lisa Dubois, Secretary
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.

By:  Mike Jones, Assistant Secretary
Signature of Registered Agent

01/14/2019
Date

If signing on behalf of an entity:

CT Corporation System
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)

2019 JAN 19 A 9 52
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