

N16 0000 10175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

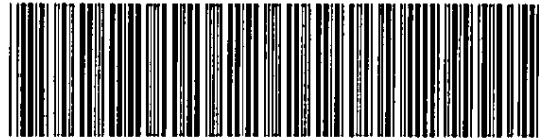
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100363030051

04/21/21--01012--004 \*\*35.00

2021 01 21 12

6/3/21  
SP

# BOSWELL & DUNLAP L.L.P.

ATTORNEYS AT LAW • ESTABLISHED 1900

Clarence A. Boswell  
1902-2005  
David R. Carmichael •  
Savannah Young Cerullo  
Robert C. Chilton  
Seth B. Claytor  
W. A. "Drew" Crawford

P.O. Drawer 30, Bartow, Florida 33831  
245 South Central Avenue, Bartow, Florida 33830  
Phone: (863) 533-7117  
Fax: (863) 533-7412

Sender's e-mail address: robert@bosdun.com

George T. Dunlap, III, Retired  
Keith D. Miller  
Frederick J. Murphy, Jr. ;  
Sean R. Parker  
Jillian T. Spangler  
Donald H. Wilson, Jr.

± Board Certified, City, County, Local  
Government Law

\* Board Certified, Criminal Trial

April 19, 2021

*Via US regular mail*

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Highlands Grace Property Owners Association, Inc.  
Document Number: N16000010175

Dear Sir or Ma'am:

Please find, enclosed for filing, the *Statement of Change of Registered Office of Registered Agent or Both for Corporations* for Highlands Grace Property Owners Association, Inc. Also enclosed is my firm's check, payable to the Department of State, in the amount of \$35.00 for payment of the filing fee. If you have any questions, do not hesitate to contact me.

Very truly yours,  
BOSWELL & DUNLAP L.L.P.



Robert C. Chilton

Enclosures (as stated)  
cc: Client

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** HIGHLANDS GRACE PROPERTY OWNERS' ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** NI6000010175

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:

ROBERT C. CHILTON, ESQ.  
Name of Contact Person

BOSWELL & DUNLAP LLP  
Firm/Company

245 SOUTH CENTRAL AVENUE  
Address

BARTOW, FL 33830  
City/State and Zip Code

ROBERT@BOSDUN.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT C. CHILTON, ESQ. at ( 863 ) 533-7117  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: HIGHLANDS GRACE PROPERTY OWNERS' ASSOCIATION, INC.
2. The principal office address: 3189 PEARLY DRIVE  
LAKELAND, FL 33812
3. The mailing address (if different): P.O. BOX 333, HIGHLAND CITY, FL 33812
4. Date of incorporation/qualification: 10/17/2016 Document number: N16000010175
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)

MARTIN E. SNOW, JR.

200 LAKE MORTON DRIVE, SUITE 200

LAKELAND, FL 33801

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

ROBERT C. CHILTON, ESQ.

245 SOUTH CENTRAL AVENUE

P.O. Box NOT acceptable

BARTOW, FL 33830

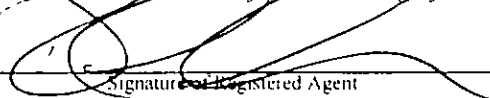
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

X   
Signature of an officer or director

X ROY E. BREWER, DP  
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.

  
Signature of Registered Agent

April 19, 2021  
Date

If signing on behalf of an entity:

ROBERT C. CHILTON, ESQ.

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)