

N116033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

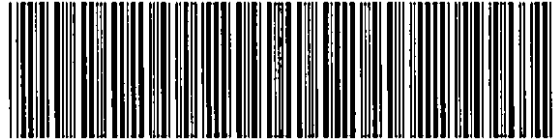
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08/28/18--01016--011 **33.00

Amcl

R. WHITE
SEP 20 2018

FILED
2018 SEP 19 AM 9:20
SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 6, 2018

BRIAN BICKERTON DC
5641 WESSON RD
NEW PORT RICHEY, FL 34655

SUBJECT: RIVER CROSSING HOMEOWNERS ASSOCIATION, INC.
Ref. Number: N16033

We have received your document for RIVER CROSSING HOMEOWNERS ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted is for a profit corporation to become a profit or social benefit corporation. As this entity is a not for profit corporation, this is the wrong form. Please find enclosed and complete the correct form.

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.

Rebekah White
Regulatory Specialist II

Letter Number: 318A00018476

RECEIVED
10 SEP 19 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: RIVER CROSSING HOMEOWNERS ASSOCIATION, INC

DOCUMENT NUMBER: N 16033

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRIAN BICKERTON DC

(Name of Contact Person)

RIVER CROSSING HOMEOWNERS ASSOCIATION, INC

(Firm/ Company)

5641 WESSON RD

(Address)

NEW PORT RICHEY, FLORIDA 34655

(City/ State and Zip Code)

RIVERCROSSINGHOA@OUTLOOK.COM

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

For further information concerning this matter, please call:

BRIAN BICKERTON DC

(Name of Contact Person)

at (727) 809-4585

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed)

(MAILED W/INITIAL APPLICATION)
SEE COVER LETTER

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

Articles of Amendment
to
Articles of Incorporation
of

FILED

2018 SEP 19 AM 9:20

RIVER CROSSING HOMEOWNERS ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N16033

(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:

N/A

The new

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.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Name of New Registered Agent:

N/A

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

N/A

(Zip Code)

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.

N/A

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>X</u> Change ____ Add ____ Remove	<u>V</u>	<u>DONALD HOGGARD</u>	<u>5642 REDHAWK DR</u> <u>NEW PORT RICHEY, FL 34655</u>
2) ____ Change <u>X</u> Add ____ Remove	<u>T</u>	<u>HOLLY MAKRES</u>	<u>5641 WESSON RD</u> <u>NEW PORT RICHEY, FL 34655</u>
3) ____ Change <u>X</u> Add ____ Remove	<u>S</u>	<u>BRIAN BICKERTON, DL</u>	<u>5641 WESSON RD</u> <u>NEW PORT RICHEY, FL 34655</u>
4) ____ Change <u>X</u> Add ____ Remove	<u>D</u>	<u>GINA COLLEY</u>	<u>5504 GANNETT CT</u> <u>NEW PORT RICHEY, FL 34655</u>
5) ____ Change <u>X</u> Add ____ Remove	<u>D</u>	<u>PAM MARRON</u>	<u>5913 FALL RIVER DR</u> <u>NEW PORT RICHEY, FL 34655</u>
6) <u>X</u> Change ____ Add ____ Remove	<u>D</u>	<u>CAROL SHEDD</u>	<u>5906 REDHAWK DR</u> <u>NEW PORT RICHEY, FL 34655</u>
7) <u>X</u> Change ____ Add ____ Remove	<u>D</u>	<u>VIRGINIA COCKERILL</u>	<u>5500 WESSON RD</u> <u>NEW PORT RICHEY, FL 34655</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: 30 JULY 2018, if other than the date this document was signed.

Effective date if applicable: 30 JULY 2018
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 17 AUG 2018

Signature [Handwritten Signature]
(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)

BRIAN BICKERTON, DC
(Typed or printed name of person signing)

SECRETARY, RIVER CROSSING HOME OWNERS ASSOCIATION, INC
(Title of person signing) ACTING FOR BOARD OF DIRECTOR