

NI9000 006 738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

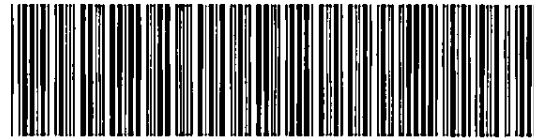
(Business Entity Name)

(Document Number)

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FILED  
2019 OCT 10 PM 5:49  
TALLAHASSEE, FL

OCT 20 2019  
C. Kins-

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** HIGHLAND CHASE COMMUNITY ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** N19000006738

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:

Patti Ferris

Name of Contact Person

Evergreen Lifestyles Management, LLC

Firm/Company

2100 S Hiawassee Road

Address

Orlando, FL 32835

City/State and Zip Code

PFerris@evergreen-lm.com

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

For further information concerning this matter, please call:

Patti Ferris

Name of Contact Person

at ( 321 ) 558 6502

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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: HIGHLAND CHASE COMMUNITY ASSOCIATION, INC.

2. The principal office address: 2100 S Hiawassee Road Orlando, FL 32835

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 07/02/2019 Document number: N19000006738

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)

STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON

P.A. 401 EAST JACKSON STREE, SUITE 2100

TAMPA, FL 33602

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

Evergreen Lifestyles Management, LLC

2100 S Hiawassee Road Orlando, FL 32835

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 so authorized by the board, or the corporation has been notified in writing of the change.

DocuSigned by:

Zenzi Rogers

Signature of an officer or director  
635A71EC3371457...

Zenzi Rogers

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.*

Patti Ferris

Signature of Registered Agent

10/02/2019

Date

If signing on behalf of an entity:

Patti Ferris

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)