# N21000009418

(Re	questor's Name)	
(Ád	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
		<u></u>
(BU	isiness Entity Nam	8)
(De	cument Number)	
ertified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Q. SI	LAS
	1	₹ -5+5
<b>5 a</b>		
1111122		
	Office Use Onl	Ŷ



12.93/21++01906++018 \*\*\*35.00







## RECEIVED

2022 JAN 11 AM 10: 09

FLORIDA DEPARTMENT OF STATE Division of Corporations SECRETARY OF STATE TALLAHASSEE, FL

December 21, 2021

DANIEL WASSERSTEIN 301 YAMATO ROAD SUITE 2199 BOCA RATON, FL 33431

SUBJECT: THE PRESERVE AT BANNON LAKES HOMEOWNERS ASSOCIATION, INC. Ref. Number: N21000009418

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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.

Querida R Silas Regulatory Specialist II

Letter Number: 821A00030771



TO: Amendment Section Division of Corporations

THE PRESERVE AT BANNON LAKES HOMEOWNERS ASSOCIATION, INC. SUBJECT:

Name of Corporation

# DOCUMENT NUMBER: N2100009418

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:

### DANIEL WASSERSTEIN

Name of Contact Person

# WASSERSTEIN, P.A.

Firm/Company

# 301 YAMATO ROAD, SUITE 2199

Address

#### BOCA RATON, FL 33431

City/State and Zip Code

# danw@wassersteinpa.com

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

For further information concerning this matter, please call:

DANIEL WASSERSTEIN

Name of Contact Person

561 288-3999

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

CR2E045 (03/12)

#### STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1. The name of the corporation: THE PRESERVE AT BANNON LAKES HOMEOWNERS ASSOCIATION, INC.

2. The principal office address: 124 DEL WEBB PARKWAY, PONTE VEDRA, FL 32081

3. The mailing address (if different): N/A

4. Date of incorporation/qualification: 8/3/2021

Document number: N21000009418

2022

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)

JAMES G. KATTLEMAN

**215 NORTH EOLA DRIVE** 

**ORLANDO, FL 32801** 

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

WASSERSTEIN, P.A.		JAN	IJ
301 YAMATO ROAD, SUITE 2199	-11- 770 7-1		Contraction []
P.O. Box NOT acceptable		P	
BOCA RATON, FL 33431			

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

Date

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 dulies, 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.

**Registered** Agent

11/22/2021

If signing on behalf of an entity:

DANIEL WASSERSTEIN

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)