

N26196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

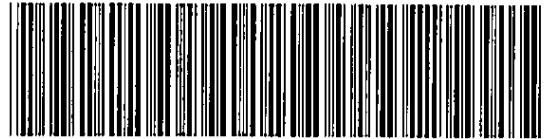
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700331625317

07/08/19--01007--009 **35.00

FILED
19 JUL -8 AM 8:43
SEATTLE, WA
FALANASSER, FLORIDA

JUL 19 2019

T SCHROEDER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hometown Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N26196

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:

Eric Krowicki

Name of Contact Person

Hometown Homeowners Assoc, Inc.

Firm/Company

5352 Rocking Horse Place

Address

Oviedo FL 32765

City/State and Zip Code

ekrowicki@hotmail.com

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

For further information concerning this matter, please call:

Eric Krowicki

Name of Contact Person

407 925-4208

at ()
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: Hometown Homeowner's Association, Inc.
2. The principal office address: P.O. Box 2285
Goldenrod, FL 32733
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/25/1988 Document number: N26196

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)

Robert Lamkay
5388 Rocking Horse Place
Oveido, FL 32765

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

Eric Krowicki
5352 Rocking Horse Place
P.O. Box NOT acceptable
Oviedo, FL 32765

FILED
19 JUL -8 AM 8:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Robert Lamkay
Signature of an officer or director

Robert Lamkay, President
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.

Eric Krowicki
Signature of Registered Agent

July 06/19
Date

If signing on behalf of an entity:

Eric Krowicki
Typed or Printed Name

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE