

N28126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

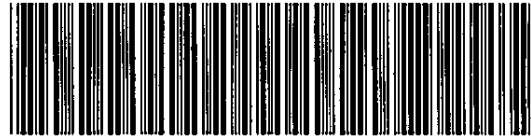
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500263382645

RA
change

500263382645
08/25/14--01007--018 **35.00

FILED
2014 SEP 15 PM 2:42
TALLAHASSEE, FLORIDA
CLERK OF COURT

OK
9/16/14

*00789, 00686, 00711



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

14 SEP 15 AM 10:58

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

August 29, 2014

Michele Reilly
Willoughby Golf Club Inc
3001 SE Doubleton Drive
Stuart, FL 34997

SUBJECT: WILLOUGHBY GOLF CLUB, INC.
Ref. Number: N28126

We have received your document for WILLOUGHBY GOLF CLUB, 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):

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

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.

Annette Ramsey
Regulatory Specialist II

Letter Number: 514A00018558

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Willoughby Golf Club, Inc.

Name of Corporation

DOCUMENT NUMBER: N28126

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:

Michele Reilly

Name of Contact Person

Willoughby Golf Club, Inc.

Firm/Company

3001 SE Doubleton Drive

Address

Stuart, FL 34997

City/State and Zip Code

mreilly@willoughbygolfclub.com

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

For further information concerning this matter, please call:

Michele Reilly

Name of Contact Person

at (772) 221-2508

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: Willoughby Golf Club, Inc.
2. The principal office address: 3001 SE Doubleton Drive
Stuart, FL 34996
3. The mailing address (if different): same
4. Date of incorporation/qualification: 8/30/1988 Document number: N28126
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)

Kirsty Taylor (resigned)

3001 SE Doubleton Drive

Stuart, FL 34997

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

Michele Reilly

3001 SE Doubleton Drive

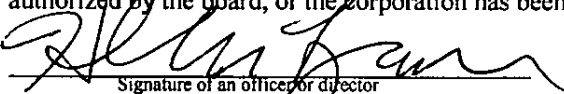
P.O. Box NOT acceptable

Stuart, FL 34997

FILED
2014 SEP 15 PM 2:42
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.


Signature of an officer or director

Henry V. Logan, Treasurer

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

September 10, 2014

Date

If signing on behalf of an entity:

Michele E Reilly

Typed or Printed Name

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