Division of Corporations Electronic Filing Cover Sheet

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(((H25000021508 3)))



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To:		1025
	Division of Corporations	
	Fax Number : (850)617-6380	20 1
From:		
	Account Name : C T CORPORATION SYSTEM	· · · · · · · · · · · · · · · · · · ·
	Account Number : FCA000000023	
	Phone : (614)280-3338	25 T
	Fax Number : (614)573-3996	

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email 1	Address:			
Emall.	Address:			

REGISTERED AGENT CHANGE

DEER CREEK VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

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Electronic Filing Menu Corporate Filing Menu

Help

By:

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

statement of cha	provisions of sections 607,0502, 617,0502 inge is submitted for a corporation organi	zed under the laws of the State c	of FL	
in orde	r to change its registered office or registe	red agent, or both, in the State o	of Florida.	
1. The name of	the corporation: Deer Creek Village Ho	omeowners' Association, Inc		
2. The principal	office address: 2180 WEST SR 434,	SUITE 5000, LONGWOO	DD, FL 32779	
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 10/26/1988	Document number: N290)23	
	I street address of the current registered ag timent of State: (If resigned, enter resigned		with the	
	SENTRY MANAGEMENT IN	C	_	
2180 WEST SR 434, SUITE 5000				
	LONGWOOD, FL 32779		- H21	
6. The name and (if changed):	d street address of the new registered agen	t (if changed) and /or registered	12.73	
	C 1 Corporation System			
	1200 South Pine Island Road			
	P.O. Box	NOT acceptable	******	
	Plantation, Florida 33324			
The street address changed will	ess of its registered office and the street a be identical.	address of the business office o	f its registered agent.	
Such change wa authorized by th	as authorized by resolution duly adopted to board, or the corporation has been not	by its board of directors or by iffied in writing of the change.	an officer so	
Signatur	r Hladkark: re of an officer or director	Lori Gladkowski P	resident, HOA	
I further agree i of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all statu al I am familiar with and accept the obli- ing filed merely to reflect a change in the speen notified in writing of this change.	l agree to act in this capacity, tes relative to the proper and c gation of my position as registe registered office address, I ha	omplete performance red agent. Or, if this reby confirm that the	
C T Corporation	System Services	01/14/2025		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
Terrie Bates, Ass	·			
T	yped or Printed Name	F 635 00 1 1 1		
	* * * FILING FE	P.2. N 5 N . O O P. P. P. P.		

* * * 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 (04/13)