

N29232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COLEE HAMMOCK EAST HOMEOWNER'S ASSOCIATION, INC
Name of Corporation

DOCUMENT NUMBER: N 29232

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:

MICHAEL J HART
Name of Contact Person

COLEE HAMMOCK EAS HOMEOWNER'S ASSOC. INC
Firm/Company

1610 NE 1ST STREET, APT 7
Address

FORT LAUDERDALE, FL 33301
City/State and Zip Code

HARTMJ60@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL J HART at (202) 841-4398
Name of Contact Person 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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1 The name of the corporation: COLEE HAMMOCK EAST HOMEOWNERS ASSOCIATION, INC.
- 2 The principal office address: 1610 NE 1ST STREET APT 1
FORT LAUDERDALE, FL 33301
- 3 The mailing address (if different): SAME
- 4 Date of incorporation/qualification: 11/10/1988 Document number 1-29232
- 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)

Resigned

ANDREW B CAMPBELL
1610 NE 1ST STREET APT 10
FORT LAUDERDALE, FL 33301

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

DAVID T MILLER
1610 NE 1ST STREET, APT 1
P.O. Box NOT acceptable
FORT LAUDERDALE, FL 33301

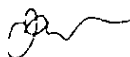
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical

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.

Michael J. Hart
Signature of an officer or director

MICHAEL J. HART 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

April 8, 2019

Date

If signing on behalf of an entity:

David T. Miller

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE,
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6227, TALLAHASSEE, FL 32314
CR28015 (03/12)

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