

N30346

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
12 DEC 20 PM 2:41

RA/RO/chg
@ 12/20/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hidden Lake Villas of Polk County Office Owners
Name of Corporation Association, Inc.

DOCUMENT NUMBER: N 30346

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:

Bruce G. Baker Jr.

Name of Contact Person

Employee Insurance Benefits of Florida, Inc.

Firm/Company

210 Lake Harris Drive

Address

Lakeland, FL 33813

City/State and Zip Code

eibo.fl.insbenefits@verizon.net

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

For further information concerning this matter, please call:

Bruce G. Baker Jr. at (863) 701-2200
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 11, 2012

BRUCE G. BAKER, JR.
EMPLOYEE INSURANCE BENEFITS OF FLORIDA
210 LAKE HARRIS DRIVE
LAKELAND, FL 33813

SUBJECT: HIDDEN LAKE VILLAS OF POLK COUNTY OFFICE OWNERS
ASSOCIATION, INC.
Ref. Number: N30346

We have received your document for HIDDEN LAKE VILLAS OF POLK
COUNTY OFFICE OWNERS ASSOCIATION, 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):

We are enclosing a computer printout which reflects the registered agent and
registered office now on file with this office. Please amend your document
accordingly.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 312A00029286

RECEIVED

12 DEC 20 AM 10:51

REGISTRATION
TALLAHASSEE, FLORIDA

544
ATTACHED on
THANK YOU

**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: Hidden Lake Villas of Polk County Office Owners Association Inc.

2. The principal office address: 210 Lake Harris Drive
Lakeland, FL 33813

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1989 / Reinstated
2009 Document number: N 30346

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)

John F. Wendel
336 W. Highland Drive, Ste 4
Lakeland, Florida 33813

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

Bruce G. Baker Jr.
210 Lake Harris Drive
P.O. Box NOT acceptable
Lakeland, FL 33813

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.

Bruce G. Baker Jr.
Signature of an officer or director

Bruce G Baker Jr 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.

Bruce G. Baker Jr.
Signature of Registered Agent

11-29-12
Date

If signing on behalf of an entity:

Bruce G. Baker Jr.
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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 DEC 2011 PM 2:45