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(Address)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

Ra Change

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Windstone Property Owners Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N32246

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:

Jacob Ensor, Esquire

Name of Contact Person

Ross Earle & Bonan, P.A.

Firm/Company

789 SW Federal Hwy, Suite 101

Address

Stuart, FL 34994

City/State and Zip Code

jee@reblawpa.com

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

For further information concerning this matter, please call:

Jacob Ensor

Name of Contact Person

at 772 287-1745

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

CR2E045 (03/12)

WIN 108045  
\$35.00

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TALLAHASSEE



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FLORIDA DEPARTMENT OF STATE

Division of Corporations

STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

December 29, 2014

JACOB ENSOR, ESQUIRE  
ROSS EARLE & BONAN, P.A.  
789 SW FEDERAL HWY., SUITE 101  
STUART, FL 34994

SUBJECT: WINDSTONE PROPERTY OWNERS ASSOCIATION, INC.  
Ref. Number: N32246

We have received your document for WINDSTONE PROPERTY 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):

The registered agent must sign accepting the designation. ✓

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.

Diane Cushing  
Senior Section Administrator

Letter Number: 514A00027332

Attached! →  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Windstone Property Owners Association, Inc.
2. The principal office address: c/o Signature Property Mgmt, 738 Colorado Ave., Stuart, FL 34994
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 3/7/97 Document number: N32246

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)

Fox, Wackeen, Dungle, Beard, Sobel, Bush

3473 SE Willoughby Blvd

Stuart, FL 34994

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

Jacob Ensor, Esquire/Ross Earle & Bonan, P.A.

789 SW Federal Hwy, Suite 101

P.O. Box NOT acceptable

Stuart, FL 34994

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.

Linda J. Emilson  
Signature of an officer or director

LINDA J. Emilson, 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.*

[Signature]  
Signature of Registered Agent

1-9-15  
Date

If signing on behalf of an entity:

Ross Earle & Bonan, P.A.  
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

FILED  
15 JAN 15 PM 2:06  
TALLAHASSEE  
SECRETARY OF STATE