## N37891

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Victoria Chase Homeowner's Association Inc.

Name of Corporation

DOCUMENT NUMBER: N37891

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:

## Michelle Richardson Name of Contact Person Firm/Company 2230 S. Terrace Blvd Address Longwood, FL 32779 City/State and Zip Code

m.richardson720@gmail.com

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

For further information concerning this matter, please call:

Michelle Richardson

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.						
		-	-	-			
AIEW/	1. The name of the corporation: Victoria Chase Homeowner's Association, Inc.  2. The principal office address: 2230 S. Terrace Blvd., Longwood, FL 32779						
NEW	2. The principal	office address:	<u> </u>	., <u></u> ,	,		<del>-</del>
NE M	3. The mailing a	ddress (if different): P.	O. Box 16193	35, Altamonte	Springs, Fl	L 32716-1	935
	4. Date of incorporation/qualification: 4/23/1990						
	5. The name and	street address of the cut tment of State: (If resign	rrent registered age		ffice on file wi	th the	
		Michelle Richard	lson				
		4546 Malik Cres	ent				
		Orlando, FL 328	310			F2	
NEW	6. The name and (if changed):	I street address of the ne	ew registered agent	(if changed) and /o	r registered of	2015 NOV 12 PM K. TATE SECRETARY OF STATE TALE AHASSEE. FLORID	-T-7
		Michelle Richard	lson	<u>, , , , , , , , , , ,</u>	. <u>.                                   </u>	12 SSE	, m
	- 2230 S. Terrace Blvd					mar a	
		P.O. Box NOT acceptable  - Longwood, FL 32779					? <del>-</del>
	-					200	
	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	as authorized by resolu- ne board, or the corpora	tion duly adopted bation has been noti	by its board of direction of the field in writing of the	ctors or by an one change.	officer so	
	D	/W.J		Damien Jones	s, Presider	nt	
	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.						
	Middle	Richardser		11/01/2015			
	Sig	nature of Registered Agent			Date		
	If signing on be	ehalf of an entity:					
	1	yped or Printed Name	<u></u>				
		*	* * FILING FEE	E: \$35.00 * * *			