

N38544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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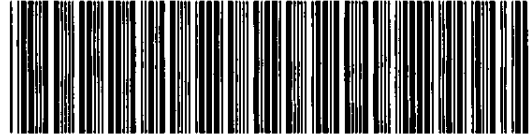
(Business Entity Name)

(Document Number)

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12-23-14

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: HEATHERWOOD HOMEOWNERS ASSOCIATION of POLK COUNTY, INC.

DOCUMENT NUMBER: N38544

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PHILIP R. COOPY

Name of Contact Person

Firm/ Company

100 HEATHERWOOD BLVD.

Address

LAKE WALES FL 33859

City/ State and Zip Code

PCOOPYS@AOL.COM

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

For further information concerning this matter, please call:

PHILIP R. COOPY

Name of Contact Person

at ( 863 ) 255-6638

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**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

FILED  
15 JAN -5 AM 9:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
15 JAN -5 AM 9:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

HEATHERWOOD HOMEOWNERS ASSOCIATION of POLK COUNTY  
(Name of Corporation as currently filed with the Florida Dept. of State)

N30544

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name

B. Enter new principal office address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

, Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

N/A

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>PD</u>	<u>JACKLYN BOBB</u>	<u>105 HEATHERWOOD BLVD.</u> <u>LAKE WALES, FL 33859</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VPD</u>	<u>DERICK HOLLE</u>	<u>108 HEATHERWOOD BLVD.</u> <u>LAKE WALES, FL 33859</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TSD</u>	<u>PHILIP R. COOPY</u>	<u>106 HEATHERWOOD BLVD</u> <u>LAKE WALES, FL 33859</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PD</u>	<u>HAROLD HENNEN II</u>	<u>116 HEATHERWOOD BLVD.</u> <u>LAKE WALES, FL 33859</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>UPD</u>	<u>GINA SOWARDS</u>	<u>4432 CARILTON CT.</u> <u>LAKE WALES, FL 33859</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>ANGIE CAIN</u>	<u>4429 CARILTON CT</u> <u>LAKE WALES, FL 33859</u>
7) <input checked="" type="checkbox"/> Add	<u>D</u>	<u>JOHN FITZGERALD</u>	<u>109 HEATHERWOOD BLVD.</u> <u>LAKE WALES, FL 33859</u>

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: DECEMBER 29, 2014, if other than the date this document was signed.

Effective date if applicable: JANUARY 1, 2015  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated DECEMBER 29, 2014

Signature Philip R. Coopy  
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

PHILIP R. COOPY  
(Typed or printed name of person signing)

SECRETARY / TREASURER / REGISTERED AGENT  
(Title of person signing)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 23, 2014

PHILIP R. COOPY  
HEATHERWOOD HOMEOWNERS ASSOC.  
100 HEATHERWOOD BLVD.  
LAKE WALES, FL 33859

SUBJECT: HEATHERWOOD HOMEOWNERS' ASSOCIATION OF POLK  
COUNTY, INC.

Ref. Number: N38544

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The incorrect form was submitted. Please complete form pursuant to a Florida Not for Profit Corporation, section 617.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair  
Regulatory Specialist II

Letter Number: 914A00027159

SUBMITTED CORRECTED DECEMBER 29, 2014.

F.R. Coopy