## 1138488

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(Address)		
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PICK-UP	☐ WAIT	MAIL MAIL
(Business Entity Name)		
(Document Number)		
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- **800265521768** 10/20/14--01028--014 \*\*35.00

RAIRDIMS NO 11.17.14

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Landmark Reserve Homeowners Assn., Inc.

Name of Corporation

DOCUMENT NUMBER

N38688

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:

Diana Savasta

Name of Contact Person

Scannavino, Inc.

Firm/Company

720 Brooker Creek Blvd. Suite 206

Address

Oldsmar, FL 34677

City/State and Zip Code

dsavasta@mgmt-assoc.com

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

For further information concerning this matter, please call:

Diana Savasta

<sub>।(</sub>४१४

433-2030

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



November 3, 2014

DIANA SAVASTA SCANNAVINO, INC. 720 BROOKER CREEK BLVD - STE. 206 OLDSMAR, FL 34677

SUBJECT: LANDMARK RESERVE HOMEOWNERS' ASSOCIATION, INC.

Ref. Number: N38688

We have received your document for LANDMARK RESERVE HOMEOWNERS' 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.

The document must have original signatures.

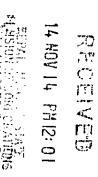
A stamped signature's not acceptable.

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: 714A00023424



## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR **BOTH FOR CORPORATIONS** DCT T 5 2014 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: Landmark Reserve Homeowners Association, Inc. 2. The principal office address: 720 Brooker Creek Blvd. Suite 206 Oldsmar, FL 34677 3. The mailing address (if different): Document number: N38688 4. Date of incorporation/qualification: 06/18/90 ∠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 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Scannavino, Inc. 720 Brooker Creek Blvd. Suite 206 P.O. Box NOT acceptable Oldsmar, FL 34677 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. Nermine Rubin, Treasurer Signature of an officer or director 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. September 30, 2014 If signing on behalf of an entity: Dominick Scannavino

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

Typed or Printed Name