

1448867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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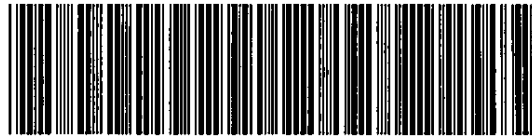
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 15, 2007

J. PATRICK NOLAN
5604 HERITAGE BLVD
WILDWOOD, FL 34785

SUBJECT: WILDWOOD COUNTRY RESORT HOMEOWNERS ASSOCIATION,
INC.
Ref. Number: N48867

We have received your document for WILDWOOD COUNTRY RESORT HOMEOWNERS ASSOCIATION, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must have original signatures.

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) 245-6908.

Sylvia Gilbert
Document Specialist

Letter Number: 007A00011301

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WILLOW COUNTRY RESORT HOME OWNERS ASSN., INC.
(Name of Corporation)

DOCUMENT NUMBER: N 48867

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:

J. PATRICK VOLLMER, PRES. BOARD OF DIRECTORS
(Name of Contact Person)

WILLOW COUNTRY RESORT HOA, INC.
(Firm/Company)

5604 HERITAGE BLVD.
(Address)

WILLOW, FL 34785
(City/State and Zip Code)

For further information concerning this matter, please call:

J. PATRICK VOLLMER, PRES. at (352) 330-0129
(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.

1. The name of the corporation: WILDWOOD COUNTRY RESORT HOA, INC.
2. The principal office address: 5604 HERITAGE BLVD.
WILDWOOD, FL 34785
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/14/1992 Document number: N 48867
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ROBERT E. FARMER
5604 HERITAGE BLVD.
WILDWOOD, FL 34785

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

J. PATRICK NOLAN
5604 HERITAGE BLVD.
WILDWOOD, FL 34785
(P.O. Box NOT acceptable)

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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.

J. Patrick Nolan
(Signature of an officer or director)

J. PATRICK NOLAN PRES. HOA
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity, BOARD OF DIRECTORS
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.

J. Patrick Nolan
(Signature of Registered Agent)

2/9/2007
(Date)

If signing on behalf of an entity:

J. PATRICK NOLAN
(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