

N93000003573

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600317568146

08/27/18--01015--025 **35.00

FILED

2018 AUG 27 PM 1:54

SECRETARY OF STATE
TALLAHASSEE, FL

C. GOLDEN

AUG 28 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Deer Pointe Community Association, Inc
Name of Corporation

DOCUMENT NUMBER: N93000003573

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:

Jessica Speak
Name of Contact Person

FLA Rent, Inc
Firm/Company

1488 Seminola Blvd
Address

Casselberry, FL 32707
City/State and Zip Code

jessica@flarent.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Speak at (407) 339-5797
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Deer Pointe Community Association, Inc
2. The principal office address: 1488 Seminola Blvd, Casselberry, FL 32707
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 08/05/1993 Document number: N93000003573
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)

GRIFFIN, CATHY

447 DEER POINTE CIRCLE

CASSELBERRY, FL 32707

2018 AUG 27 PM 1:54
FILED
SECRETARY OF STATE
TALLAHASSEE, FL

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

Jessica Speak
1488 Seminola Blvd

P.O. Box NOT acceptable

Casselberry, FL 32707

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.

William K. Howard, Jr.
Signature of an officer or director

William K. Howard, Jr.
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.

Jessica A. Speak
Signature of Registered Agent

8/23/18
Date

If signing on behalf of an entity:

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
CR2E045 (03/12)