

N93000004042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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change

05/26/15--01018--023 \*\*35.00

FILED  
2015 MAY 26 PM 3:06  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

ADR  
5/29/15

May 19, 2015

**VIA US MAIL**

Florida Department of State  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: **GREATER GROVES HOMEOWNERS ASSOCIATION, INC.**

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
2. \$35 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (888) 705-7274.

Respectfully,

Ben Pomeroy  
REGISTERED AGENT SOLUTIONS, INC.  
1701 Directors Blvd., Suite 300  
Austin, TX 78744

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GREATER GROVES HOMEOWNERS ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** N93000004042

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:

c/o Ben Pomeroy (RASi)

Name of Contact Person

Registered Agent Solutions, Inc

Firm/Company

1701 Directors Blvd., Suite 300

Address

Austin, TX 78744

City/State and Zip Code

clientservices@rasi.com

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

For further information concerning this matter, please call:

Ben Pomeroy

Name of Contact Person

at (888) 705-7274

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

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2015 MAY 26 PM 3:06

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.01502, 617.01502, 607.1508, or 617.1508, Florida Statute, this statement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GREATER GROVES HOMEOWNERS ASSOCIATION, INC.

2. The principal office address: 15100 GREATER GROVES BLVD

CLERMONT, FL 34714

3. The mailing address (if different): P.O. BOX 135083

CLERMONT, FL 34713

4. Date of incorporation/qualification: 09/01/1993 Document number: N93000004042

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)

BRET JONES, P.A. (C/O ALISON M. STRANGE, ESQ.)

700 ALMOND STREET

CLERMONT, FL 34711

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

Registered Agent Solutions, Inc.

155 Office Plaza Dr Suite A

P.O. Box 2891 Tallahassee

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

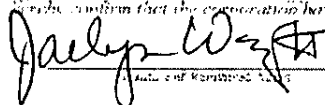
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of authorized officer

Russell Robertson, Director

Printed 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.

  
\_\_\_\_\_  
Signature of registered agent

05/19/2015

Date

It is signed on behalf of an entity

Jaclyn Wright, Asst. Secretary

Typed printed name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6307, TALLAHASSEE, FL 32314  
LRC7045 (4-12)