

N94 000002426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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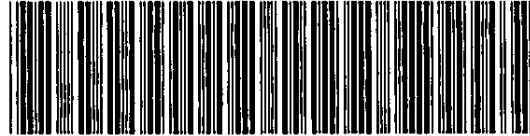
(Business Entity Name)

(Document Number)

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FEB 19 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SOUTH HILL MOBILE HOME ASSOC. INC.
Name of Corporation

DOCUMENT NUMBER: NY N94000002426

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:

DELL ANDERSON
Name of Contact Person

SOUTH HILL MOBILE HOME PARK ASSOC. INC.
Firm/Company

34945 HAPPINESS WAY
Address

ZEPHYRHILLS, FL 33541
City/State and Zip Code

SOUTHILL55@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DELL ANDERSON at (813) 783-3528
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: SOUTH HILL MOBILE HOME PARK ASSOC, INC.
2. The principal office address: 3494.5 HAPPINESS WAY
ZEPHYRHILLS, FL 33541
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 8/11/1987 Document number: N94000002426
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)

GAIL GOURRE
34921 FANTASY LN.
ZEPHYRHILLS, FL 33541

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

JULIA W ACKER
34910 FANTASY LANE
ZEPHYRHILLS, FL 33541

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TALLAHASSEE, FLORIDA

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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.

Don Anderson
Signature of an officer or director

DELL M ANDERSON PRESIDENT
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.

John W. Acker
Signature of Registered Agent

1-21-2016
Date

If signing on behalf of an entity:

Julia W. Acker
Typed or Printed Name

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