N94000002849

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SECRETARY OF STATE
TALLAHASSEE, FI OR III

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MAR 1 8 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Haines	s City Merchants and Business Association, Inc.
DOCUMENT NUMBER: N9400000	2849
The enclosed Articles of Amendment an	d fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
Bruce R. Prince	
	(Name of Contact Person)
Prince Land Services, In	(Firm/ Company)
233 9th Street North	(Address)
Haines City, FL 33844	(City/ State and Zip Code)
For further information concerning this	natter, please call:
Bruce R. Prince (Name of Contact Person)	at (<u>863</u>) <u>422-5207</u> (Area Code & Daytime Telephone Number)
Enclosed is a check for the following am	ount made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee Certificate 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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Articles of Amendment to Articles of Incorporation of

Haines City Merchants and (Name of Corporation as currently file				
N9400				.
(Document Number of C	Corporati	on (if known)		
Pursuant to the provisions of section 617.1006, Florida 5 the following amendment(s) to its Articles of Incorporat		this Florida Not For Pro	fit Corporation a	dopts
A. If amending name, enter the new name of the cor	poration	<u>n:</u>		
Haines City Mainstreet and MerchantsAs	seocia	tion Inc		
The new name must be distinguishable and contain the abbreviation "Corp." or "Inc." "Company" or "Co."	ie word	"corporation" or "incor	porated" or the	1
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		235 North 9th Street	<u>t </u>	
		Haines City, FL 33844_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	D)	Same as above	99 MAR 16 AN 10: SECRETARY OF ST TALLAHASSEE, FLO	
D. If amending the registered agent and/or registere new registered agent and/or the new registered of Name of New Registered Agent:	ffice add	<u>lress:</u>	r the pame of the	
New Registered Office Address:	1 L	e Vandwie Aake Hatchine da street address)	ha Road	-
			, Florida <u>338</u> (Zip Code)	
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. position.			the obligations o	f the
Signature	of New	Registered Agent, if chang	ging	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>P</u>	Bruce R. Prince	233 9th Street North Haines City, FL 33844	Add Remove
<u>VP</u>	Steve Leary	8687 W. Irlo Bronson Memorial Highway, STE Kissimmee, FL 34747	2₽ □ Remove
<u>T</u>	Ellen McCarter	36250 Highway 27 Haines City, FL 33844	Add Remove
	nding or adding additional Articles, additional sheets, if necessary). (Be		
		·	

The date of each amendment	(s) adoption: $3-3-09$
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
A doubles of A secondary and (c)	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or radopted by the board of dir	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated	3-3-09
Signature	32/
	the chairman or vice chairman of the board, president or other officer-if directors
	e not been selected, by an incorporator — if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
Ouk	er court appointed inductary by that inductary)
	Sruce R Prince (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	\mathcal{Q}_{-} .
	res,
	(Title of person signing)

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