1/96000004983

(Re	equestor's Name)	
(Ac	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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TALLAHASSEE FLORIDA

MAR 3 1 2015 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Middlemore Landings Homeowners' Association, Inc.

Name of Corporation

Name of Corporation

DOCUMENT NUMBER: N9600004983

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:

Denise Pearson

Name of Contact Person

Pearson Accounting

Firm/Company

105 Tierra Circle

Address

Ormond Beach, FL 32174

City/State and Zip Code

pearsonacctg@bellsouth.net

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

For further information concerning this matter, please call:

Denise Pearson

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

		organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	
1. The name of the cor	poration: Middlemore	Landings Homeowners' Association	on, Inc.
2. The principal office	address: 1112 Gleng	ad Run, Ormond Beach, Florida 32	174
3. The mailing address	(if different):		
4. Date of incorporatio	on/qualification: 09/26/1	996 Document number: N96000004	4983
5. The name and street		ered agent and registered office on file with the	
Вес	ker & Poliakoff, P.A.		
111	N. Orange Avenue,	Suite 1400	
Orla	Orlando, Florida 32801		5 MAR
6. The name and street (if changed):	address of the new registere	ed agent (if changed) and /or registered office	25
Maryellen G. Konera Esquire		AM 9:	
150 South Palmetto Avenue, Suite 300		္မ	
Dav	Р.О. Во tona Beach, Florida	ox NOT acceptable 32114	
,-		street address of the business office of its registe	red agent,
		lopted by its board of directors or by an officer seen notified in writing of the change.	
Signature of an	mbard officer or director	Joe Lombard, President	
performance of my du agent. Or, if this doci	ipty with the provisions of all lities, and I am familiar with ument is being filed merely t	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as regi to reflect a change in the registered office addres ified in writing of this change.	stered is, I
2		3-20-15	
_	Registered Agent	Date	
If signing on behalf of	ran entity:		
Typed or F	T G. KODE 9)	

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