N96000005553

(Re	equestor's Name)		
	idress)		
(AC	idress)		
(Ac	Idress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Do	cument Number)		
(20	ourient (40111561)		
Certified Copies	Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:		
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		J	

Office Use Only



500417060325

S. CHATHAM

OCT 23 2023

10/11/23--01023--002 **35.00

COVER LETTER

TO:	Amendment Section Division of Corporations			
	ECT: Hidden Lakes Ladies' Golf Associatio of Corporation	n, Inc.		
DOC	UMENT NUMBER: N9600005553			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
	return all correspondence concerning thi			
	C. Peterson			
Name	of Contact Person	·		
	on Law Group			
Firm/C	Company			
	E. Dixie Fwy, 2nd Floor			
Addre	SS			
	myrna Beach, FL 32168			
City/S	tate and Zip Code	- 		
E-mai	l address: (to be used for future annua	2010 a ptt. net		
For fu	rther information concerning this matter,	please cali:		
James	Name of Contact Person at (386)428-2464 Name of Contact Person Area Code & Daytime Telephone Number			
	Name of Contact Person	Area Code & Daytime Telephone Number		
Enclos	ed is a \$35.00 check made payable to the	Department of State.		
	Mailing Address: Amendment Section	Street Address:		
	Division of Corporations	Amendment Section Division of Corporations		
	P.O. Box 6327			
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute inge is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida	1
1. The name of	the corporation: Hidden Lakes Ladies' Golf Association, Inc.	
	office address: 35 Fairgreen Avc., New Smyrna Beach, FL 32168	
2. The moiling	address (if different): 3530 Grande Tuscany, New Smyrna Beach, FL 32168	<u>~</u>
	poration/qualification: 10/28/1996 Document number: N96000005553	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	James C. Peterson	7 0 5:
	418 Canal Street	1:57
	New Smyrna Beach, FL 32168	~
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	
	James C. Peterson	
	2650 N. Dixie Fwy.	
	P.O. Box NOT acceptable New Smyrna Beach, FL 32168	
The street addreas changed will	ess of its registered office and the street address of the business office of its regis be identical.	tered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an office hoard, or the corporation has been notified in writing of the change.	r so
Signatu	Joyce Otle	
I hereby accept I further agree i of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete of I am familiar with and accept the obligation of my position as registered agent agent filed merely to reflect a change in the registered office address. I hereby continues to be notified in writing of this change.	performance t. Or, if this irm that the
0-3-23	7	
~	half of an entity:	
- Iz	yped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

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