

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N9700005075

1. Corporation Name

HOMEOWNERS' ASSOCIATION OF UNDERHILL ESTATES SUBDIVISION, INC.

Principal Place of Business

2. Principal Place of Business

6685 CLARK ROAD SARASOTA FL 34241 Mailing Address

6685 CLARK ROAD SARASOTA FL 34241

2a. Mailing Address

## FILED Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90015 030 \*\*\*\*61.25

120847 - 90015 - 30



3. Date Incorporated or Qualifed

4906 S	State Rd.	64, East	26 4	4906	State I	χij.	. 64	, East	09/09/1997			
Suite, Apt.	#, etc.			Suite, Ap	t. #, etc.	Т			4. FEI Number		Ap	plied For
22			27						65-0805530		No.	t Applicable
City & Stat	te			City & St	ate				5. Certifcate of Status Des	sired XIX	\$8.75 <i>A</i>	
23 Brader	nton, FL		28 B	rader	nton, F	<b>T</b>			C. Scrittons of Status Box		Fee Re	quired
Zip		Country		Zip			Count	ry	6. Election Campaign Fina	ancing	\$5.00	May Be
24 34208	8 <b>25</b> Manatee <b>29</b> 34208						30 Manatee		. Trust Fund Contribution		Added t	o Fees
Name and Address of Current Registered Agent									10. Name and Address of	New Registered	Agent	
							٤	Name	Jayne Underhill			_
UNDERHILL, WAYNE							B			Acceptable)		· · · · · · · · · · · · · · · · · · ·
6685 CLARK ROAD								4906	dress (P.O. Box Number is Not A State Rd. 64, Eas	st		
SARASOTA FL 34241							8	3				
OAIVIOOI	711101211						-	4 City			85 Zip C	`ode
							0		denton	FL	342	
11. Pursuant	to the provisions	of Sections 617.0502	and 61	7.1508, F	lorida Statut	les,	the abo	we named co	moration submits this statement	for the numpse of	changing its	registered
office or r	registered agent	or both, in the State of and accept the obligation	Florida	a. Such ci	hange was a	nutho	orized b	ov the corpora	tion's board of directors. I hereby	y accept the appoir	ntment as reg	gistered
=					ì	1 1	J. 1.	Ti:M		01/21/	20	
SIGNATURE	Signature, typed or pri	derhill, Pres	SLCC:	ITC_ applicable.	<u> Wayiy</u>	Reg	istered Ac	gent signature requ	ired when reinstating)	01/21/9	17	
12.		OFFICERS AND					13.		ADDITIONS/CHANGES	TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	DPT			[.	DELETE	T	1.1 11114				Change	☐ Addition
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	SARASOTA F						1.4 CITY					
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	0000 01 101/							ET ADDRESS				
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TITLE					DELETE		6.1 TITLE				Change	☐ Addition
NAME							6.2 NAMI	1				
STREET ADDRESS							6.3 STRE	ET ADDRESS				
CITY OT 71D							6.4 CITY	-ST-ZIP				İ

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: May SIGNATURE REQUIRE

1/21/99

(941) 744-0211 Daytime Phone # CR2E037 (11/98)