

N98000003799

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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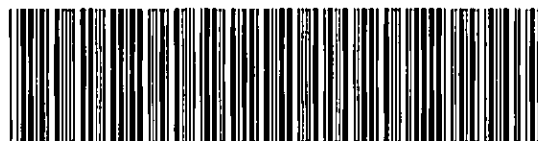
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 JAN 11 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FL

2/20/21

Car

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: REGENCY HEIGHTS HOMEOWNERS ASSOCIATION INC.

DOCUMENT NUMBER: N98000003799

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLO LOVASCO

(Name of Contact Person)

REGENCY HEIGHTS HOMEOWNERS ASSOCIATION INC

(Firm/ Company)

2550 STATE ROAD 580 LOT 187

(Address)

CLEARWATER, FLORIDA 33761

(City/ State and Zip Code)

CARLO 637@AOL.COM

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

For further information concerning this matter, please call:

CARLO LOVASCO

(Name of Contact Person)

at 727-224-9429

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED

REGENCY HEIGHTS HOMEOWNERS ASSOCIATION, INC. 2021 JAN 14 AM 10:41
(Name of Corporation as currently filed with the Florida Dept. of State)

SECRETARY OF STATE
TALLAHASSEE, FL.

N98000003799

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

2550 STATE ROAD 580

187

CLEARWATER, FL. 33761

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

2550 STATE ROAD 580

187

CLEARWATER, FL. 33761

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

CARLO LOVASCO

2550 STATE ROAD 580 LOT #187

(Florida street address)

New Registered Office Address:

CLEARWATER

(City)

Florida

33761

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>SANDRA BELL</u>	<u>2550 SR 580</u> <u># 461</u> <u>CLEARWATER, FL 33761</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>HENRY MANUWALING</u>	<u>2550 SR 580</u> <u># 210</u> <u>CLEARWATER, FL 33761</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Joyce Nichols</u>	<u>CLEARWATER, FL 33761</u> <u>2550 STATE ROAD 580</u> <u>LOT # 320</u> <u>CLEARWATER, FL 33761</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>CARLO LOVASCO</u>	<u>2550 STATE ROAD</u> <u># 187</u> <u>CLEARWATER, FL 33761</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>Rudy KAZMIERSKI</u>	<u>2550 STATE ROAD 580</u> <u># 277</u> <u>CLEARWATER, FL 33761</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>KENNETH DEGRASSE</u>	<u>2550 STATE ROAD 580</u> <u># 410</u> <u>CLEARWATER, FL 33761</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

<input checked="" type="checkbox"/> ADD	<u>S</u>	<u>KAREN LOVELL</u>	<u>2550 STATE ROAD 580</u> <u># 217</u> <u>CLEARWATER, FL 33761</u>

✓ ADD D PATRICIA PERRICONE 2550 STATE ROAD 580
463
CLEARWATER, FL. 33761

✓ ADD D JUDY CHILDS 2550 STATE ROAD 580
401
CLEARWATER, FL. 33761

✓ ADD D NADMI RUBIN 2550 STATE ROAD 580
1122
CLEARWATER, FL. 33761

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: 1-6-2021
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

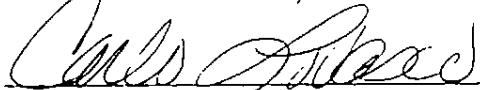
- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated

6-6-2021

Signature



(By the chairman or vice chairman of the board, president or other officer if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

CARLO LOVASCO

(Typed or printed name of person signing)

PRESIDENT - HOA REGENCY HEIGHTS MHC

(Title of person signing)