

N98000006462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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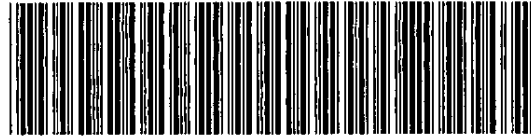
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

5/9/04

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: HARBORLAKES RESIDENTS' ASSOCIATION

DOCUMENT NUMBER: ~~FEL #65-8874847~~ N98000006462

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

Please return all correspondence concerning this matter to the following:

~~MARGARET R YODER~~
MIKE HAWKINS

(Name of Contact Person)

(Firm/ Company)

~~6025 STAGE ROAD~~
3737 EL JOBEAN ROAD #173

(Address)

~~MEMPHIS TN 38134~~
PORT CHARLOTTE, FL 33953

(City/ State and Zip Code)

STITCHALONG@ ATT.NET

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

For further information concerning this matter, please call:

MARGARET R YODER

901

581-0471

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

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

- | | | | |
|-----------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 19, 2017

MIKE HAWKINS
3737 EL JOBEAN RD #173
PORT CHARLOTTE, FL 33953

SUBJECT: HARBOR LAKES OWNER'S ASSOCIATION, INC.
Ref. Number: N98000006462

We have received your document for HARBOR LAKES OWNER'S ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please file the document as either Articles of Amendment or Restated Articles of Incorporation pursuant to applicable Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain
Regulatory Specialist II

Letter Number: 717A00007567

Articles of Amendment
to
Articles of Incorporation
of

HARBOR LAKES OWNERS ASSOCIATION, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

N98000006462

(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:

HARBOR LAKES RESIDENTS' ASSOCIATION, INC

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp.," "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**)*

3737 EL JOBEAN RD

PORT CHARLOTTE, FL 33953

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

3737 EL JOBEAN RD

STE 173

PORT CHARLOTTE, FL 33953

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:

MIKE HAWKINS

3737 EL JOBEAN RD STE 173

(Florida street address)

New Registered Office Address:


PORT CHARLOTTE

(City)

Florida 33953
(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

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

Change to read:

ARTICLE III PURPOSE AND POWERS

The purpose of this Corporation is to conduct and carry on the normal business of a not for profit organization. The corporation has the authority to represent Harbor Lakes RV Resort residents with any issues concerning the welfare and safety of these residents and strive to ensure that the Harbor Lakes RV Resort's park operation and maintenance is in accordance with applicable Florida Statutes. The Corporation shall have the powers specified in Florida Statutes 617.302.

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

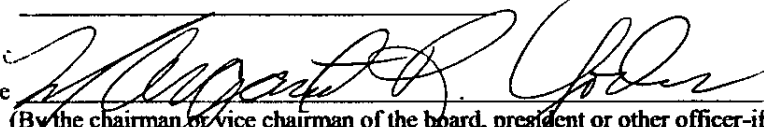
Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 April 7, 2017

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)

Margaret R Yoder

(Typed or printed name of person signing)

Treasurer

(Title of person signing)