

799000000263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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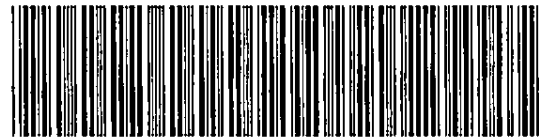
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dale Hammock of Port Orange Homeowners' Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N99000000263

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:

Melissa Burns
Name of Contact Person

Win Win Association Management, Inc.
Firm/Company

P.O. Box 731196
Address

Ormond Beach, FL 32173
City/State and Zip Code

winwinmgmt1@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Burns at (386) 672-6430
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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Oak Hammock of Port Orange Homeowners Association Inc
2. The principal office address: 3 Bayberry Drive
Ormond Beach, FL 32174
3. The mailing address (if different): P.O. Box 731196
Ormond Beach, FL 32173
4. Date of incorporation/qualification: 1/14/1999 Document number: N99000000263
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Cheryl Weber
5889 S. Williamson Blvd Suite 1301
Port Orange, FL 32128

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Melissa Burns
3 Bayberry Drive
P.O. Box NOT acceptable
Ormond Beach, FL 32174

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

John Richardson President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Melissa Burns
Signature of Registered Agent

10/13/17
Date

If signing on behalf of an entity:

Oak Hammock of Port Orange Homeowners Association Inc.
Typed or Printed Name

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