N99000004187

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
8: 00 STATE LORIDA
CEC Second Office Only Office Ose Only



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08/28/09--01001--008 **35.00

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Ad Mary Reuss 8-28-09

COVER LETTER

то:	Amendmer Division of	t Section Corporations					
SUBJ	ECT:	Pineloch H	omeowners As	ssociation on			
DOC	UMENT NU	MBER:	N9900000	4187			
The en	nclosed States	nent of Change of Regi	istered Office/Agent	and fee are submitt	ed for filing.		
Please	e return all co	rrespondence concernin	g this matter to the f	ollowing:			
	Spencer Solomon						
Name of Contact Person							
Southwest Property Management							
			Firm/Company				
	P.O. Box 783367						
Address							
	Winter Garden, FL 34778 City/State and Zip Code						
	spencerswpm@yahoo.com E-mail address: (to be used for future annual report notification)						
For fu	rther informa	tion concerning this ma	atter, please call:				
		pencer Solomon	at (407	656-1081		
	Nan	ne of Contact Person	A	rea Code & Daytin	656-1081 ne Telephone Number		
Enclos	sed is a \$35.0	0 check made payable t	to the Department of	State.			
		Mailing Address: Amendment Sect Division of Corp P.O. Box 6327 Tallahassee, FL	oorations	Street Address: Amendment Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations B Center Circle		

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

•	•	o17.0302, 007.1308, or 017.1308, Fior n organized under the laws of the State	-
		r registered agent, or both, in the State	
1. The name of t	he corporation: Pineloch Ho	omeowners Association	
2. The principal	office address: 13350 W Cold	onial Drive, Suite 330	
Winter Gar	rden, FL 34787		
3. The mailing a	ddress (if different): PC	180x 783367 Garden FL 347	78
4. Date of incorp	poration/qualification: 7/13	//1999 Document number:	N99000004187
	I street address of the current regitment of State: (If resigned, enter	stered agent and registered office on fil resigned)	le with the
	Spencer Solomon		
	14443 Prunning Wood Pla	ace	99 A
	Winter Garden, FL 34787		AUG 2
6. The name and (if changed):	street address of the new register	red agent (if changed) and /or registere	
	Spencer Solomon		ORIGINAL
	13350 W. Colonial Drive,	Suite 330	P
). Box NOT acceptable	
	Winter Garden, FL 34787		
The street addre	ess of its registered office and the be identical.	e street address of the business office	of its registered agent,
Such change wa authorized by th	as authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or been notified in writing of the change	y an officer so
Buc	re of an officer or director	Bill Brasher	8/7/09
-		Printed or typed name	
I further agree to of my duties, an document is beil corporation has	the comply with the provisions of d I am familiar with and accept ng filed merely to reflect a chan been notified in writing of this	igent and agree to act in this capacity all statutes relative to the proper and the obligation of my position as regis ige in the registered office address, I i change.	l complete performance stered agent. Or, if this hereby confirm that the
	Jums 1 Xalling	8/7/09	9
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Tv	yped or Printed Name	_	
•			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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