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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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PICK-UP

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MAIL

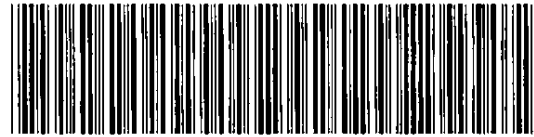
(Business Entity Name)

(Document Number)

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S TALLENT

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17 JUN 30 PM 4:57



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 26, 2017

ASHLEY TREADWAY  
QUAIL RIDGE HOMEOWNERS ASSOCIATION OF LA  
37511 QUAIL RIDGE CIRCLE  
LEESBURG, FL 34788

SUBJECT: QUAIL RIDGE HOMEOWNERS ASSOCIATION OF LAKE COUNTY,  
INC.

Ref. Number: N99000004876

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name and title of the person signing the document must be noted beneath or opposite the signature.

The registered agent must sign accepting the designation.

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.

Susan Tallent  
Regulatory Specialist II

Letter Number: 017A00008191

17 JUN 30 PM 4:35  
OFFICE OF THE CLERK  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Quail Ridge HOA of Lake County Inc.  
Name of Corporation

DOCUMENT NUMBER: N99000004876

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:

Ashley Treadway  
Name of Contact Person

Quail Ridge HOA of Lake County Inc.  
Firm/Company

37511 Quail Ridge Circle  
Address

Leesburg FL 34788  
City/State and Zip Code

atrea76837@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ashley Treadway at (352) 250-4654  
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: Quail Ridge Homeowners Association of Lake County, Inc.
2. The principal office address: 37511 Quail Ridge Circle, Leesburg, FL 34788
3. The mailing address (if different): PO Box 906, Eustis, FL 32727
4. Date of incorporation/qualification: August 16, 1999 Document number: N99000004876
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)

James Milliner

37511 Quail Ridge Circle

Leesburg, FL 34788

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

Ashley Treadway

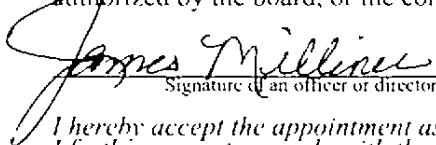
37525 Quail Ridge Circle

P.O. Box NOT acceptable

Leesburg, FL 34788

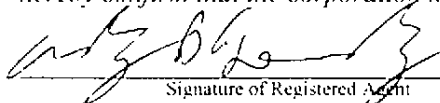
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 of an officer or director

JAMES MILLINER (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.

  
Signature of Registered Agent

8 JUNE 2017  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

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17 JUN 30 PM 4:57  
TALLAHASSEE, FLORIDA