

N99 000004876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

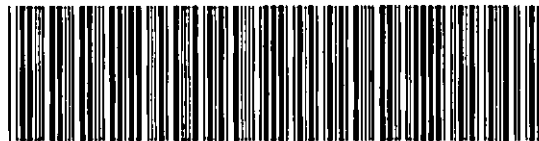
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TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Quail Ridge Homeowners association 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 Homeowners association of Lake County Inc.

Firm/Company

PO box 906

Address

Eustis, FL. 32727-0906

City/State and Zip Code

atrea76839@aol.com

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

For further information concerning this matter, please call:

Ashley Treadway

Name of Contact Person

at (352) 408-0924

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: Ashley Treadway 37525 Quail Ridge Circle Leesburg Fl. 34788
3. The mailing address (if different): PO box 906 Eustis Fl. 32727-0906
4. Date of incorporation/qualification: 08/16/1999 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)

Resigned

HUFSTEDLER, ANGELA
37511 QUAIL RIDGE CIRCLE
LEESBURG, FL 34788 US

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

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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

Ashley Treadway PD

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

3 Feb 2021

Date

If signing on behalf of an entity:

Quail Ridge Homeowners association of Lake County

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)