

P02000040598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hearns Property Manement

Name of Corporation

DOCUMENT NUMBER: P02000040598

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:

Darren Hearns

Name of Contact Person

Firm/Company

PO Box 632

Address

Oxford, FL 33484

City/State and Zip Code

darren@greatlakescarpet.com

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

For further information concerning this matter, please call:

Darren hearns

Name of Contact Person

at (352) 267-3986

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: Hearns Property Management, Inc
2. The principal office address: 1596 Black Lake Dr.
The Villages, FL 32159
3. The mailing address (if different): PO Box 632
Oxford, FL 33484
4. Date of incorporation/qualification: 04/04/2002 Document number: P02000040598
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)

Dawn Cary

10145 CR 117

Oxford, FL 34484

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

Darren Hearns

13553 U. S. HWY 441

P.O. Box NOT acceptable

The Villages, Florida, 32159

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.

Eldene Hearns
Signature of an officer or director

Eldene Hearns, Director

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]
Signature of Registered Agent

7/2/2012

Date

If signing on behalf of an entity:

Darren Hearns

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 (03/12)