

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

N23000000502

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000408532 3)))



H230004085323ABC.

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

To:  
 Division of Corporations  
 Fax Number : (850)617-6380

From:  
 Account Name : C T CORPORATION SYSTEM  
 Account Number : FCA000000023  
 Phone : (614)280-3338  
 Fax Number : (614)573-3996

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

2023 NOV 29 PM 5: 22  
 FILED

**REGISTERED AGENT CHANGE**  
**LAKESPUR AT WELLEN PARK HOMEOWNERS ASSOCIATION, INC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

2023 NOV 29 AM 8: 15

**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 FL \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LAKESPUR AT WELLEN PARK HOMEOWNERS ASSOCIATION, INC.

2. The principal office address: 19503 S. WEST VILLAGES PARKWAY #14  
VENICE, FL 34293

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 01/20/2023 Document number: N23000000502

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)

STEARNS WEAVER MILLER WEISSLER ALIHADEFF & SITTERSON, P.A.

C/O CHRISTIAN F. O'RYAN, ESQ., 401 EAST JACKSON ST, STE 2100

TAMPA, FL 33602

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

C T Corporation System

1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

2023 NOV 29 PM 5:22

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.

*Jori Sawan*

Signature of an officer or director

Jori Sawan, Secretary

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.*

C T Corporation System

By:

*Jeri Bates*

Signature of Registered Agent

11/09/2023

Date

If signing on behalf of an entity:

Terrie Bates, Assistant Secretary

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)