723806

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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07/08/04--01038--001 **105.00

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PS 7/15/04

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		
4		
SUBJECT: Tymber Skan On The Lake Owners Associa	tion, Section One, Inc.	
(Name of	corporation)	
,		
DOCUMENT NUMBER: 723806		
The enclosed Statement of Change of Registered Office/A	agent and fee are submitted for filing.	
Please return all correspondence concerning this matter to	the following:	
Kenneth R. Uncapher		
(Name of person)		
DeCubellis, Meeks & Uncapher, P.A.		
(Name of fi	rm/company)	
837 North Garland Avenue		
(Add	dress)	
Orlando, Florida 32801	·	
	and zip code)	
For further information concerning this matter, please cal	I:	
· ·		
Kenneth R. Uncapher	at (407) 872-2200	
(Name of person)	at (407) 872-2200 (Area code & daytime telephone number)	
Enclosed is a \$35.00 check made payable to the Department	ent of State.	
Mailing Address: Amendment Section	Street Address:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399	
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, th tted for a corporation organized under the laws of the State of Florida	is state	ment of in order
	ristered office or registered agent, or both, in the State of Florida.		_in oraer
1 The name of	he corporation: Tymber Skan On The Lake Owners' Association, Section One, Inc	<u>.</u>	
-	office address: 2650 Skan Ct., Orlando, FL 32839		
z. The principal	office address.		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 7-5-1972 Document number: 723806		
	I street address of the current registered agent and registered office on file with the tment of State:		
	Tukdarian & Uncapher, P.A.,		
	228 Hillcrest Street		
	Orlando, FL 32801	0	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office	8- TNF 4	T
	DeCubellis, Meeks & Uncapher, P.A.	P#	m
	837 North Garland Avenue	င္မ	Ö
	(P.O. Box or personal mailbox NOT acceptable)	ဋ	
	Orlando, Florida 32801		
The street addre changed will be	ess of its registered office and the street address of the business office of its register identical.	ed agei	nt, as
Such change withe board, or th	as authorized by resolution duly adopted by its board of directors or by an officer so e corporation has been notified in writing of the change.	o autho	rized by
Richard	Richard Shontere, President (Printed or typed name and tit	ie)	
I hereby accept I further agree duties, and I an being filed mer been notified to	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete per a familiar with and accept the obligation of my position as registered agent. Or, if ely to reflect a change in the registered office address, I hereby confirm that the confirm of this change.	format this do rporati	nce of my cument is on has
	(Signature of Registered Agent) (Date)	a	
If signing on bo	chalf of an entity:		
Kenneth R. Ur	ncapher Partner UP		
	(Typed or Printed Name) (Capacity)		

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