726470

Manacement_{ivo.} 2180 State Road 434 W Ste 5000 Longwood FL 32779-5044 BR 5000/B (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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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	provisions of sections 607.0502					atutes,
•	change is submitted for a corpor in order to change its regi	~		-	-	e State
of Florida.					AL SE	S
•	ne corporation: Buccaneer Co	ondominiu	m. Inc.		AL	
2. The principal	office address: 2180 W SR 43	4 STE 500	00		ASS	<u>.</u>
	LONGWOOD FL				Ēi-≺	⊋ [
2 The mailing at					FLS.	E C
5. The manning ac	idiess (ii different)					9
4. Date of incorp	oration/qualification: 05/22/1	1972	Document n	umber:726	6470	
Florida Depart T	street address of the current regiment of State: IM NOLAN 175 HWY A-1-A	stered agen	t and registered	d office on file	e with the	;
	0X 900					
5	ATELLITE BEACH FL 32937	7				
6. The name and changed):	d street address of the new regi	istered ager	nt (if changed)	and /or regis	stered off	ice (if
-	JAMES W HART JR				•	
	SENTRY MANAGEMENT : (P.O. Box or persona				-	
_	2180 W SR 434 STE ! LONGWOOD FL 32779	5000 -5044	acceptable)			
The street address agent, as change	ss of its registered office and the d will be identical.	e street add	ress of the busi	iness office o	f its regis	stered
- VIII VZ	s authorized by resolution duly as board, or the comporation has be chairman or the board)	adopted by been notifie	its board of direct in writing of MAC	ארין או	an officer	r so
registered agent office address, I	the appointment as registered as comply with the provisions of my duties, and I am familiar wit. Or, if this document is being thereby confirm that the corport	n ana acce îled merelv	pi ine obligatio to reflect a ch	on of my posi ange in the r	non as egistered	<u>.</u>
If signing on behalf	of an entity:					
JAMES W HA				SIDENT		_
(T)	ped or Printed Name)		(Čapa	acity)		

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