745955

(Re	equestor's Name)	
(Ad	ldress)	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: RAINBOW SPRINGS PROPERTY OWNERS' ASSOCIATION, INC. (Name of Corporation)
DOCUMENT NUMBER: 745 955
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:
RICHARD (DICK) A. LEMMA- (Name of Contact Person)
RAINBOW SPEINGS Property Owners' Assoc. Inc. (Firm/Company)
8601 Sw 190 th Ave RD (Address)
DUNNELLON, FL 34432 (City/State and Zip Code)
For further information concerning this matter, please call:
RICHARD (DICK) LemmA at (352) 489-1621 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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 FLORI OA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: RAINBOW SPEINGS PROPERTY OWNERS' ASSOCIATION,
2. The principal office address: \$601 Sw 190 th Ave RD. DUNNELLOW FL. 34432
3. The mailing address (if different): RAINBOW SPRINGS PROPERTY CHINES' ASSOC
P.O. BOX 3389 DUNNELLON FL 34430
4. Date of incorporation/qualification: 2/15//979 Document number: 745955
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State;
Robert A. Stermer
8585 SW HWY 200 Suite 9
OCALA FL 34481 = 28
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Robert A. Stermer
7763 Sw H16HwAY 200 PN ω C
OCALA FL 34476
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) (Printed or typed name and tifle)
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) (Date)
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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