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THE LAW OFFICES OF  
**LOBECK & HANSON**

PROFESSIONAL ASSOCIATION

749312

April 22, 2002

CONDOMINIUM  
COOPERATIVE AND  
COMMUNITY  
ASSOCIATIONS  
CIVIL LITIGATION  
PERSONAL INJURY  
FAMILY LAW  
LAND USE LAW  
ESTATES AND TRUSTS

Florida Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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-04/25/02--01033--014  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

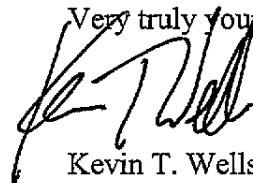
Re: Wildewood Springs II-B Condominium Association, Inc.  
Statement of Change of Registered Office or Registered Agent

Dear Sir or Madam:

Enclosed for filing with your office is an original Statement of Change of Registered Office or Registered Agent or Both for Corporations. Also enclosed is an Association check (Check No. 1065) in the amount of \$35 made payable to the Division of Corporations for the filing fee. Please change your corporate records accordingly.

Thank you for your courtesies and cooperation in this matter.

Very truly yours,



Kevin T. Wells, Esquire

KTW/elk  
Enclosures

cc: Wildewood Springs II-B Condominium Association, Inc. c/o Mr. Warren Weil, Manager  
(w/encl.)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2002 APR 25 AM 10:29

R.A. Charge  
HFT  
4-30-2002

**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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Wildewood Springs II-B Condominium Association, Inc.

2. The mailing address of the corporation: 4983 Ringwood Meadow

Sarasota, Florida 34235

3. Date of incorporation/qualification: 10/15/1979 Document number: 749312

4. The name and address of the current registered agent and office:

PAMI Management, Inc.

4983 Ringwood Meadow

Sarasota, Florida 34235

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P. O. Box Not Acceptable)

Kevin T. Wells, Esquire

Lobeck & Hanson, P.A.

2033 Main Street, Suite 403

Sarasota, Florida 34237

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.

  
(Signature of an officer, chairman or vice chairman of the board)

4-18-2002  
(Date)

PETER VENNERA PRESIDENT  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

 Esq.  
(Signature of Registered Agent)

4-22-02  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2002 APR 25 AM 10:29