750396

– SENTRY ManaGement∞

___ 2180 State Road 434 W Ste 5000 Longwood FL 32779-5044 GOLFVIEW 212900 RETURN SERVICE REQUESTED 900002632669--5 -09/04/98--01106--012 *****35.00 ******35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.					
	(Corpo	ration Name)	(Do	cument #)	
2	(Согро	ration Name)	(Document #)		
3. (Corporation Name)			(Do	cument #)	スタグで
4	4. (Corporation Name)		(Do	cument #)	<u> </u>
☐ Walk in ☐ Mail out		Pick up time Will wait	Photocopy	Certified Copy Certificate of Status	
NEW FILINGS:		Andrew Control Control	OMENTS		
Profit Amendment		nt			
NonProfit		Resignatio	n of R.A., Officer/ Direc	tor	
Limited Liability		Change of Registered Agent			
Domestication		Dissolution/Withdrawal			

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

Other

REGISTRATION/
Foreign
Limited Partnership
Reinstatement
Trademark
Other

Merger

RA Chg.

VS SEP 1 6 1998

Examiner's Initials	
---------------------	--

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 $\underline{\mathsf{FLORIDA}}$ submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is:GOLFV	IEW HOMEOWNER'S ASSOCIATION, INC. 3
1b. The mailing address of the corporation is :	2180 WEST SR 434 STE 5000 LONGWOOD FL 32779-5044
1c. Date of incorporation: 12/28/97	% (.
2. The name and address of the current regis	tered agent and office:
DONALD J MUNCH	
C/O FOUR SEASONS MGMT 10	036 SAWGRASS DR #3
PONTE VEDRA BEACH, FL 3	2082
3. The name and address of the new registered	agent and office:(P.O. Box Not Acceptable)
JAMES W. HART, JR.	
SENTRY MANAGEMENT, INC. 2180 WEST SR 434 STE 50	00
LONGWOOD FL 32779-5044	
The street address of its registered office and registered agent, as changed, will be identical.	d the street address of the business office of its
Such change was authorized by resolution duly	adopted by its board of directors or by an officer
so authorized by the board.	30,00
Cignature of an officer chairman or	5A4 98 (Date)
(Signature of an officer, chairman or vice chairman of the board)	(500)
TOM BABER PRESIDENT	
(Printed or typed name and title)	to according of aroung for the choice states
Having been named as registered agent and a corporation, I hereby accept the appointments. I further agree to comply with the provisions performance of my duties, and I am familiar registered agent.	to accept service of process for the above stated s registered agent and agree to act in this capacity of all statutes relative to the proper and complete with and accept the obligation of my position as
(Signature of Registered Agent)	7/21/48 (Date)
If signing on behalf of an entity:	() /01/
JAMES W. HART, JR. (Typed or Printed Name)	PRESIDENT (Capacity)

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

FILING FEE: \$35.00