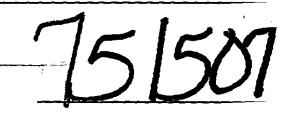
MANAGEMENT, INC.
5037 Ringwood Meadow Suite B
Sarasota, FL 34235



(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer.



December 8, 2005

PAMI MANAGEMENT, INC. 5037 RINGWOOD MEADOW - SUITE B SARASOTA, FL 34235

SUBJECT: CHANDLERS FORDE CONDOMINIUM ASSOCIATION, INC.

Ref. Number: 751507

We have received your document for CHANDLERS FORDE CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 705A00071118

Irene Albritton Document Specialist

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 is: CHANDLERS FORDE CONDOMINIUM
ASSOCIATION, INC
2. The mailing address of the corporation is: 5041 RINGWOOD MEADOW STE.
SARASOTA, FL 34235
3. Date of incorporation/qualification: 03/12/1980 Document number: 751507
4. The name and address of the current registered agent and office:
MANAGE MENT CONCEPTS OF SA RASOTA CO
5766 BRONK AVE #A GIGG Clark Cuta G
SARASOFA FL 34231 SarasotaFL34238
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
PAMI MANAGEMENT, INC
5041 RINGWOOD MEADOW STEZ
SARASOTA, FL 34235
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.
Met Ala Transce 11/1/05
(Signature of an officer, chairman or vice chairman of the board) (Date)
Thomas Dean, Treasurer
· (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.
11/7/05
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Melvin Rubin (Typed or Printed Name) Prosident (Capacity)
(Typod of Finited Manie) (Capacity)

. * FILING FEE: \$35.00 * * *