

754017

1.

(Requestor's Name)

(Address)
**BECKER &
POLIAKOFF**

RIVER OAK CENTER, 401 SOUTHEAST OSCEOLA STREET, FIRST FLOOR, STUART, FLORIDA 34994

(City/State/Zip/Phone #)

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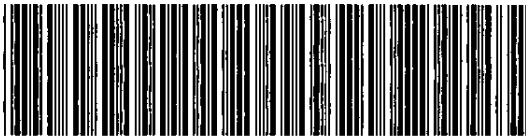
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 DEC 10 PM 4:24

**STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH**

To the Secretary of State of the State of Florida.

Pursuant to the provision 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 for the purpose of changing its registered office of registered agent, or both, in the State of Florida.

1. The name of the corporation is The Woodlands Owners Association, Inc.
2. The mailing address of the corporation is: P.O. Box 13678, Ft. Pierce, FL 34982
3. Date of incorporation/qualification: 9/2/1980 Document number: 754017
4. The name and address of the current registered agent and office
Sandra Rennick, Gould, Cooksey, Fennell, P.A., 979 Beachland Blvd., Vero Beach, FL 32963
5. The name and address of the new registered agent and/or registered office is: **Lance Clouse, Esq.
Becker & Pollakoff, P.A., 401 SE Osceola Street, First Floor, Stuart, FL 34994**

The street address of its registered office and the 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.

Ashley C Hamel
(Signature of an officer, chairman or vice chairman of the Board)

12/3/12
(Date)

Ashley C Hamel, 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.

Lance Clouse
(Signature of Registered Agent)

12-06-12
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

(Date)

• ** FILING FEE: \$35.00 ** •

• Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314

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