(Req	uestor's Name)	
, (Addi	ress)	
(Addı	·	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doci	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	
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Office Use Only



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R.A. Chq.

NOV 09 2011

EXAMINER

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Wexford West Homeowners Association, Inc. Name of Corporation						
·	755000					
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:						
Elizabeth R. Mannion						
Name of Contac	of Person					
Strahauer Mannion & Son D A						
Strohauer, Mannion & Son, P.A. Firm/Company						
	1150 Cleveland Street, Suite 300					
Address	S					
Cleanuater Fl	22755					
Clearwater, FL 33755 City/State and Zip Code						
,,,						
elizabeth@smslaw.net E-mail address: (to be used for future annual report notification)						
,	•					
For further information concerning this matter, please call:	:					
Elizabeth D. Mannian	707					
Elizabeth R. Mannion Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Departme	nt of State.					
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building					

2661 Executive Center Circle

Tallahassee, FL 32301

A GARAGE AND A STATE OF THE STA

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a co	orporation organize	507.1508, or 617.1508, Florida d under the laws of the State of d agent, or both, in the State of I	Florida	
	•		neowners Association, alm Harbor, FL 34683	, Inc.	
3. The mailing a	ddress (if different): P.0	O. Box 473, Palı	m Harbor, FL 34682		
4. Date of incorp	poration/qualification:	01/16/1981	Document number:	755930	
	street address of the curtiment of State: (If resign		at and registered office on file w	ith the	
	Robert L. Tankel				
	1022 Main Street,	Suite D			
	Dunedin, FL 3469	8		-	
6. The name and (if changed):	street address of the nev	v registered agent (i	f changed) and /or registered of	fice NOV -7	ASSENTATION OF THE PROPERTY OF
	Elizabeth R. Mann	ion	·	u_	
	1150 Cleveland St			AM II: 3:	<u>ان</u>
	Clearwater, FL 33	P.O. Box NOT acc	ceptable	37 -	建,
The street addre			dress of the business office of i	its registered agent,	,
Such change wa authorized by th	is authorized by resolut be board, or the corpora	ion duly adopted by tion has been notifi	y its board of directors or by ared in writing of the change.	n officer so	
Signatur	T. Laux e of an officer or director		James Lenhox, Pr	esident	
I hereby accept I further agree t of my duties, an document is beil corporation has	the appointment as reg o comply with the prov. d I am familiar with an ng filed merely to reflec been notified in writing	istered agent and a isions of all statute, d accept the obliga it a change in the re g of this change.	gree to act in this capacity. s relative to the proper and co tion of my position as registere egistered office address, I here	mplete performanc ed agent. Or, if thi. by confirm that the	e s :
Lling Sign	nature of Registered Agent	us .	10/26/11 Date		
	half of an entity:				
	st Homeowners Ass	sociation			

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