

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

CR2E031(7/97)

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☐ Walk in ☐ Pick up time	Certified Copy	
Mail out Will wait	Photocopy Certificate of Status	
NEW FILINGS	AMENDMENTS	
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	_
OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	
77.070.04 (F. 10.F.)	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 $\frac{1}{100}$
submits the following statement in order to change its registered office or registered agent, or both in
me state of Florida.
1. The name of the corporation: tracinec sands (lub Villas
Association, Inc.
2. The mailing address of the corporation: 6500 mariner Sands dr
Stuart Fl 34997
3. Date of incorporation/qualification: Jon 15, 1982 Document number: 761472
4. The name and address of the current registered agent and office:
Frederick F. Schock
10500 mariner Sande dr.
Stuart F1 34997
 The name and address of the new registered agent (if changed) and/or registered office (if changed). (P. O. Box Not Acceptable)
Larry C. Gerstner
6500 mariner Sands dr.
Stuart F1 34997
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 anothicer-to authorized by the board.
The state of the s
(Signature of an officer, chairman or vice chairman of the board) (Date)
KENT DELANO-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.
12/2/00)
(Signature of Reglatered Agent) (Date)
If signing on behalf of an entity:
LIMPY C. GERSTWERL GENERAL MINNSOR /CHIEF OPERATION OFFICER
* * * FILING FEE: \$35.00 * * *
CR2E045(9/00)
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314