PAVESE, GARNER, HAVERFIELD, DALTON, HARRISON & JENSEN, L.L.P.

A FLORIDA LIMITED LIABILITY PARTNERSHIP

ATTORNEYS AND COUNSELORS AT LAW http://pavesegarner.com

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CHRISTOPHER J. SHIELDS BOARD CERTIFIED REAL ESTATE LAWYER (941) 336-6245

February 5, 1998

PLEASE REPLY TO FORT MYERS OFFICE

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

Re: Corkscrew Woodlands Association, Inc.

-02/09/98---01090---023

*****35.00 *****35.00

Dear Sirs:

Enclosed please find Statement of Change of Registered Office form together with our check in the amount of \$35.00.

If you have any questions, please let me know.

Very truly yours,

Christopher J. Shields

CJS:dw Enc.

FEB 1 1 1009

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

Pursuant to the provisions of section 607.0502 or 607.1508, 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.

d The name of the commence in C	orkscrew Woodlands Association, Inc.
1. The name of the corporation is:	11 3 C C C
1a. Date of incorporation11/19/82	Document number 765820 35
2. The name and address of the current registered agent and office:	
Joseph Adams, BECKER & POLIAKOFF,	P.A., 13515 Bell Tower Drive, Suite 101,
Fort Myers, Florida 33907	= -
3. The name and address of the new r (P.O. Box Not Acceptable	
Christopher J. Shields, 1833 Hendr	y Street, Fort Myers, FL 33901
The street address of its registered ag of its registered agent as changed, will	ent and the street address of the business office I be identical.
Such change was authorized by resol an officer so authorized by the board.	ution duly adopted by its board of directors or by
	SIGNATURE //
	(name and title) PROPERTY MER
·	DATE 129/98
PROCESS FOR THE ABOVE STATED IN THIS CERTIFICATE, I HEREBY AC AGENT AND AGREE TO ACT IN THIS WITH THE PROVISIONS OF ALL STAPLETE PERFORMANCE OF MY DUTITHE OBLIGATION OF MY POSITION	RED AGENT AND TO ACCEPT SERVICE OF CORPORATION AT THE PLACE DESIGNATED CEPT THE APPOINTMENT AS REGISTERED CAPACITY. I FURTHER AGREE TO COMPLY TUTES RELATIVE TO THE PROPER AND COMPLES, AND I AM FAMILIAR WITH AND ACCEPT AS REGISTERED AGENT. SIGNATURE (Registered Agent)
	DATE

CR2E045 (7-90) FILING FEE: \$35.00

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