## 769199

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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## **COVER LETTER**

TO: Amendment Section Division of Corporations				
Lakeview Villas at Pebble Creek Village Condominium Association, Inc.				
Name of Corporation				
DOCUMENT NUMBER: 769199				
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:				
Charles Evans Glausier				
Name of Contact Person				
Glausier Knight, PLLC				
400 N. Ashley Drive, Ste. 2020				
Tampa, FL 33602				
City/State and Zip Code				
cglausier@glausierknight.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:  Charles Evans Glausier 813 440-4600				
Charles Evans Glausier Name of Contact Person  Name of Contact Person  Name of Contact Person  Name of Contact Person  at (813 ) 440-4600  Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.				

Mailing Address:
Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations** Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

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



statement of char	nge is submitted for a corporation org	502, 607.1508, or 617.1508, Florida Si anized under the laws of the State of $\underline{F}$ istered agent, or both, in the State of Fl	lorida
1. The name of the	ne corporation: Lakeview Villas at Peb	ble Creek Village Condominium Asso	ciation, Inc.
2. The principal of	office address: 17824 N. US H	wy 41., Lutz, FL 33549	
•			
4. Date of incorp	oration/qualification: 07/01/1983	Document number: 769199	9
	street address of the current registered ment of State: (If resigned, enter resig	I agent and registered office on file wit med)	th the
_	Charles Evans Glausier		
	1801 N. Highland Avenue		
	Tampa, FL 33602		
6. The name and (if changed):	street address of the new registered ag	gent (if changed) and /or registered offi	29.716
-	Charles Evans Glausier		記了下
	400 N. Ashley Drive, Suite		SEE TO
•	Tampa, FL 33602	OT acceptable	THE STATE OF THE S
The street address as changed will be	ss of its registered office and the street be identical.	et address of the business office of its	registered agent,
Such change was authorized by the	s authorized by resolution duly adopt e board, or the corporation has been r	ed by its board of directors or by an onotified in writing of the change.	fficer so
/s/Diare	Childus cot an officer or director	Diane Childers, Presider	
I hereby accept to I further agree to performance of the performance o	the appointment as registered agent of comply with the provisions of all stony duties, and I am familiar with and		olete as registered
Charle		6DEC17	
If signing on beh	ature of Registered Agent aalf of an entity:	Date	
Туј	ped or Printed Name		

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