NOODOOG 6/78 Requester's Name STENSTROM, McINTOSH, COLBERT,

STENSTROM, McINTOSH, COLBERT WHIGHAM & SIMMONS, P.A. ATTORNEYS AND COUNSELLORS AT LAW P.O. BOX 4848 SANFORD. FL 32772-4848

City/State/Zip

Phone #

Office Use Only

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

1			
1.	(Corporation Name)	(Document #)	
2.	(Corporation Name)	(Document #)	
3.	(Corporation Name)	(Document #)	
4.	(Corporation Name)	(Document #)	The state of the s
	☐ Walk in ☐ Pick up time	Certifie	d Copy
	☐ Mail out ☐ Will wait	Photocopy	ate of Status
,	NEW FILINGS	AMENDMENTS -0	051351486 3/15/0201030014 *****78.75 ******35.00
	Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Di Change of Registered Agent Dissolution/Withdrawal Merger	O2 TALL
	OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICAT Foreign Limited Partnership Reinstatement Trademark Other	MAR 15 AH 9: 36 TIONSSEE FLORIDA

Examiner's Initials # 3/19

CR2E031(7/97)

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

the undersigned corporation organized under the laws of the Sta		•
submits the following statement in order to change its registered	d office or registered age	ent, or both, in
the State of Florida. 1. The name of the corporation: CARLTON WOODS	House	Access To
1. The name of the corporation: CARLION WOODS	MOMEOWNERS	178SOCIATION, AV
2. The mailing address of the corporation: P.O. Bo		
hongwood	, FLORIDA 3	2791-5322
3. Date of incorporation/qualification:I	Document number:	
4. The name and address of the current registered agent and offic	e:	
HARRY J. KWIATHO	WSKI	
HARRY J. KWIATKO	re f	
Orlando, FLORIDA	32801	
5. The name and address of the new registered agent (if changed) (P. O. Box Not Acceptable)) and/or registered office ((if changed):
NATIONAL ASSOCIATION /	Nanagement Co	mpany
NATIONAL ASSOCIATION N 165 W. State ROAD	434	, ,
Winter Springs, Flor	RIDA 32708	
The street address of its registered office and the street address agent, as changed, will be identical.		its registered
Such change was authorized by resolution duly adopted by its be authorized by the board.	poard of directors or by a	n officer so
	<u>9-18</u> (Date)	7-01
(Signification of an officer, chairman or vice chairman of the board)	(Date)	
DANG A. SENNETT (Printed or typed name and title)	· .	· · · · •
		· _
Having been named as registered agent and to accept service of corporation, I hereby accept the appointment as registered age I further agree to comply with the provisions of all statutes relaperformance of my duties, and I am familiar with and accept the registered agent.	of process for the above s nt and agree to act in thi utive to the proper and co ne obligation of my positi	tated 's capacity. mplete on as
DDD	¥	02 TAL
(Signature of Registered Agent)	(Date)	ARE A
If signing on behalf of an entity: MARC A. Blum	Poside +	ASS
(Typed or Printed Name)	(Capacity)	
* * * FILING FEE: \$35.00 *	* * *	F STA
CR2E045(9/00)		36
Division of Corporations P.O. Box 6327	TALLAHASSEE, FL 32314	وجه سر