## N00548

	(Re	questor's Name)		
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<b>–</b>	SENT Mana 2180 State Ro Longwood FL va wydda	RY DSEMI Dad 434 W Sto 32779-5044 Powtt -13	<b>251T</b> ing. 9 5000	The second State of S
	PICK-UP	WAIT	MAIL	
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Spec	ial Instructions to	Filing Officer:		
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Office Use Only





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

	e provisions of sections 607.050 If change is submitted for a corpo				
FLORIDA	in order to change its re	gistered office or regi	stered agent, or b	oth, in the State	
<i>of Florida.</i> 1. The name of	the corporation: Magnolia Po	inte Neighborhood	d Homeowners A	Association I	nc —
2. The principal	office address: 2180 W SR 4	34 STE 5000	-		
	LONGWOOD FL	32779-5044			
3. The mailing a	address (if different):				_
4. Date of incor	poration/qualification: 01/05/	1984 Docum	nent number: NOO	)548	<del>-</del>
	d street address of the current re-	,			
	Guadagnino, Anthony	F / Presidential	Group South,	Inc	
	135 W Pineview St			- J	
	Altamonte Springs, F	L 32714		ATCAS P. LOS P. LOS	
6. The name as changed):	nd street address of the new re	gistered agent (if char	nged) and /or regi	istered office (if	
	JAMES W HART JR	-4-10-11		- E P	Π
	SENTRY MANAGEMENT			- FS & 5	J
	(P.O. Box or perso 2180 W SR 434 STE LONGWOOD FL 3277	onal mailbox NOT acceptable) 5000 9–5044		24 ATE RIDA	
	ess of its registered office and the ded will be identical.				
Such change wanthorized by the	ras authorized by resolution duly the board, or the corporation has	y adopted by its board s been notified in writi AADV	of directors or by ing of the change.	an officer so	
	r, chairman or vice chairman of the board)	(Printed o	or typed name and title)		
nortormanco al	t the appointment as registered to comply with the provisions of my duties, and I am familiar whit. Or, if this document is being I hereby confirm that the corpo	nin ana accept ine opi	ugauon oi my nos	uuon as	
	Signature of Registered Agent)		(Date)		
If signing on beha		~	DDEATALL		
JAMES W H	TARI UR		PRESIDENT (Canacity)	· · · · · · · · · · · · · · · · · · ·	

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