

140200007612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

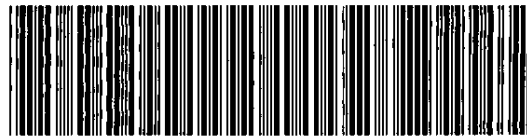
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tesoro Preserve Property Owners Association Inc.
Name of Corporation

DOCUMENT NUMBER: N02000007612

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:

Joseph C. Visconti
Name of Contact Person

Tesoro Preserve POA, Inc.
Firm/Company

108 SE Cortile Pinerio
Address

Port St. Lucie, FL 34952
City/State and Zip Code

joseph@ivalverich.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah D. Haas at (772) 398-1788
Name of Contact Person 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

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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Tesorero Preserve Property Owners Association, Inc.
- 2. The principal office address: 108 SE Cortile Pinero,
Port St. Lucie, FL 34952
- 3. The mailing address (if different): P.O. Box 9047
Port St. Lucie, FL 34985
- 4. Date of incorporation/qualification: 10/4/02 Document number: N02000007612
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

AEGIS Community Management Solutions, Inc.
8390 Championsgate Blvd. #304
Championsgate, FL 33896

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Joseph C. Visconti
108 SE Cortile Pinero
P.O. Box NOT acceptable
Port St. Lucie, FL 34952

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

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 an officer so authorized by the board, or the corporation has been notified in writing of the change.

JC Visconti
 Signature of an officer or director

Joseph C. Visconti, Pres.
 Printed or typed name and title

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

JC Visconti
 Signature of Registered Agent

7/11/11
 Date

If signing on behalf of an entity:

Joseph C. Visconti
 Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314