

N030000001899

Econ Woods
Homeowner's Association, Inc.

c/o Preferred Community Management, Inc.
P.O. Box 677307
Orlando, Florida 32867-7307



000060425190

(City/State/Zip/Phone #)

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(Business Entity Name)

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R.A. change

T BROWN OCT 17 2005

Florida Department of State, Sandra B. Mortham, Secretary of State

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, 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.

1. The name of the corporation is: ECON WOODS HOMEOWNERS ASSOCIATION, INC.

2. The mailing address of the corporation is : P.O. BOX 677307
ORLANDO, FL 32867-7307

3. Date of incorporation/qualification: 3/4/03 Document number: N03000001899

4. The name and address of the current registered agent and office:

JAMES HART % SENTRY MANAGEMENT
8180 WEST S.R. 434, SUITE 500D
LONGWOOD, FL 32779

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TALLAHASSEE, FLORIDA

5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

JOSEPH FRASCA % PREFERRED COMMUNITY MANAGEMENT
4762 N. PALM AVENUE
WINTER PARK, FL 32792

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.

[Signature] President 9/19/05
(Signature of an officer, chairman or vice chairman of the board) (Date)

KEITH RICHARDSON, PRESIDENT
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

[Signature]
(Signature of Registered Agent)

9/19/05
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)