

**NO3000009536**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

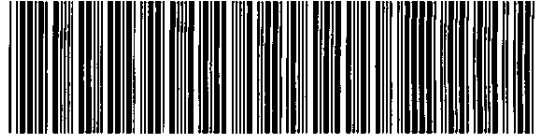
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 AUG 28 PM 2:03

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Trails of Winter Garden Homeowners Association  
Name of Corporation

**DOCUMENT NUMBER:** N03000009536

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:

Spencer Solomon  
Name of Contact Person

Southwest Property Management  
Firm/Company

P.O. Box 783367  
Address

Winter Garden, FL 34778  
City/State and Zip Code

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

For further information concerning this matter, please call:

Spencer Solomon at ( 407 ) 656-1081  
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: The Trails of Winter Garden Homeowners Association, Inc.
2. The principal office address: 13350 W. Colonial Dr. Suite 330  
Winter Garden, FL 34787
3. The mailing address (if different): P.O. Box 783367  
Winter Garden, FL 34778
4. Date of incorporation/qualification: 11/3/2003 Document number: N03000009536
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)

R  
Spencer Solomon  
14443 Pruning Wood Place  
Winter Garden, FL 34787

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

R  
Spencer Solomon  
13350 W Colonial Dr. Suite 330  
P.O. Box NOT acceptable  
Winter Garden, FL 34787

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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.

Tom Harper  
Signature of an officer or director

Tom Harper 8/5/09  
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.*

Spencer Solomon  
Signature of Registered Agent

8/5/2009  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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