

N05000008915

Florida Department of State
Division of Corporations
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To: Division of Corporations
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REGISTERED AGENT CHANGE
VIZCAY HOMEOWNERS ASSOCIATION OF POLK COUNTY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VIZCAY HOMEOWNERS ASSOCIATION OF POLK COUNTY, INC.
Name of Corporation

DOCUMENT NUMBER: N05000008915

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:

Timothy Crawford
Name of Contact Person
RealManage, LLC
Firm/Company
P.O. Box 803555
Address
Dallas, TX - 75380
City/State and Zip Code
ctcorp@realmanage.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Timothy Crawford at 972 380-3522
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

CR2E045 (03/12)

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: VIZCAY HOMEOWNERS ASSOCIATION OF POLK COUNTY, INC.
2. The principal office address: 4700 MILLENIA BLVD. SUITE 515, ORLANDO, FL 32839 US
3. The mailing address (if different):
4. Date of incorporation/qualification: 08/29/2005 Document number: N05000008915

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)

COMMUNITY MANAGEMENT PROFESSIONALS, INC.
4700 MILLENIA BLVD SUITE 515
ORLANDO FL 32839 US

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TALLAHASSEE, FLORIDA

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

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
P.O. Box NOT acceptable
Plantation, Florida 33324

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.

Signature of an officer or director: Michael Jones, Vice President
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.

By: C.T Corporation System 11/30/2012
Signature of Registered Agent Date

If signing on behalf of an entity:
Michael Jones, Assistant Secretary
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
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