(Requestor's Name)	
(Address)	•
(Address)	
(City/State/Zip/Phone #)	•
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: TOU PON KUY CONDOM (Name of Corpor	inium Association, In
DOCUMENT NUMBER: NOUDOCOC5	00
The enclosed Statement of Change of Registered Office/Age	ent and fee are submitted for filing.
Please return all correspondence concerning this matter to th	e following:
•	
Lilly Burnside	
(Name of Contact)	Person)
Delivida Descrit Mana	
Reliable Property Managers (Firm/Compar	ny)
	•
4250 Alafaya Tr. Suite 212-345	
(Address)	
Oviedo, FL 32765 (City/State and Zip	
•	(Code)
For further information concerning this matter, please call:	
Lilly Burnside at ((407) 971-3755 (Area Code & Daytime Telephone Number)
(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: TARPON KEY CONDOMINIUMS ASSOCIATION, INC.
2. The principal office address: 4250 Alafaya Tr. Suite 212-345
Oviedo, FL 32765
3. The mailing address (if different):
4. Date of incorporation/qualification: 1011 010 Document number: N 101000000050 (
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
J. Samuel Butter
151 Southhall Land, Surfezio 3
151 Southhall Land, Suitezio 32751 Moutland, FL 32751
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Lilly Burnside
Reliable Property Managers
(P.O. Box NOT acceptable)
4250 Alafaya Tr. Suite 212-345 Oviedo, FL 32765
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) (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.
Seein S. Durusedo 09-07-06
(Date)
If signing on behalf of an entity:
(Typed or Printed Name)
* * * PILING PPP • \$35.00 * * *

" " FIDING FEE: \$35.00 " " "

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)