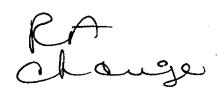
N3 1886

(Requestor's Name)				
SCHTRY				
manacement _{inc.}				
2180 State Road 434 W Ste 5000				
Longwood FL 32779-5044				
- 1,7400 L				
PICK-UP WAIT MAIL				
(Business Entity Name)				
<u></u>				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Openial mediadore to 1 mily Officer.				
<u> </u>				

Office Use Only



900060608199



10/27/05--01019--001

**35.DO

FILED

05 OCT 27 AM 11: 46

SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE

10 ps/ 06

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to th	he provisions of sections 607.0502	e, 617.0502, 607.1508, or 617.1508, FI	orida Statutes,
this statement	-	ration organized under the laws of the Si	*
<u>FLORIDA</u>	in order to change its regi	istered office or registered agent, or bo	th, in the State
of Florida.			
1. The name of	f the corporation: LAKE FOREST I	MASTER COMMUNITY ASSOCIATION I	NC
2. The principa	al office address: 2180 W SR 434	4 STE 5000	
	LONGWOOD FL	32779-5044	
3. The mailing	g address (if different):		
4. Date of inco	orporation/qualification: <u>04724/1</u> 5	989 Document number: N31	1886
	nd street address of the current reginary artment of State:	stered agent and registered office on file	with the
	HEEKIN, JAMES F JR		- O
	215 N EOLA DR		
	ORLANDO FL 32801		題る。当
6. The name a changed):	and street address of the new regi	stered agent (if changed) and /or regis	tored office (in
•	JAMES W HART JR		=
	SENTRY MANAGEMENT	INC	要用 ま
	(P.O. Box or persona 2180 W SR 434 STE 5 LONGWOOD FL 32779	I mailbox NOT acceptable) 5000 -5044	*
The street add agent, as chan	lress of its registered office and the ged will be identical.	e street address of the business office of	its registered
Tres	was authorized by resolution duly a the board, or the corporation has b	adopted by its board of directors or by a been notified in writing of the change. FREO E, BATES (Printed or typed name and title)	en officer so
Yhanahu aaaa	nt the appointment as registered as	gent and agree to act in this capacity. all statutes relative to the proper and c the and accept the obligation of my posit filed merely to reflect a change in the re ation has been notified in writing of this	omplete ion as egistered s change.
A he	(Signature of Registered Agent)	10-19-05 (Date)	<u>· </u>
If signing on beh			
JAMES W		PRESIDENT	
(Typed or Printed Name)		(Capacity)	

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