

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # N40314**

1. Corporation Name

SUNSET LAKES OF WINDEMERE HOMEOWNERS' ASSOCIATIO N, INC.

Principal Place of Business								
P O BOX 691316 ORLANDO FL 32869-316								
US - 1316								

2. Principal Place of Business

Suite, Apt. #, etc.

22

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

27

P O BOX 691316 ORLANDO FL 32869-376

- 1316

FILED May 24, 1999 8:00 am § Secretary of State

05-24-1999 90019 021 ****61.25



3. Date Incorporated or Qualifed

10/11/1990

59-3179181

4. FEI Number

Zip Country 55.00 May Be	City & State	9	City & State			-	5. Certifcate of Status Desired			\$8.75 Additional		
8. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name RAMSEY, TIM 13392 SUNSET LAKES CIR WINTER GARDEN FL 34787 11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorised by the corporation's board of interctors. In hereby accept the appointment as registered agent, and careful to the provisions of sections of 17,0502 and 617,1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, submits this statement for the purpose of changing its registered agent. I am familiar with a statement for the purpose of change and statement for the purpose of change agent and statement for the purpose of change agent and statement for the purpose of change agent agent and statement for the purpose of change agent ag	23		28							Fee Req	uired	
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14. Learnby conting that the information complied with this filling does not qualify for the exemption stated in Section 119 07(3)(i) Florida Statutes I further certify that the information	CITY-ST-ZIP						_					
	14 Lharabu	certify that the information supplied with	this filing does not qualify for	the exempt	ion state	ed in Sec	tion 119.07(3)(i), Florida	Statutes.	further cer	ify that the in	formation	

officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Applied For

Not Applicable