## N44056

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DIVISION OF COMMO

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Indian Lakes Subdivision Homeowners Association, Inc.
2. The principal	office address: 13402 Bellingham Drive, Tampa, FL 33625
3. The mailing a	ddress (if different): P.O. Box 272601, Tampa, FL 33688-2601
4. Date of incorp	poration/qualification: 6/21/91 Document number: N44056
	I street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Merilee France
	13402 Bellingham Drive
	Tampa, FL 33625
6. The name and (if changed):	A street address of the current registered agent and registered office on file with the riment of State: (If resigned, enter resigned)  Merilee France  13402 Bellingham Drive  Tampa, FL 33625  d street address of the new registered agent (if changed) and /or registered office.  Courtenay S. Terrell, c/o Gardner Law Group
	101 S. Franklin Street, Suite 101 P.O. Box NOT acceptable
	Tampa, FL 33602
The street addr	ess of its registered office and the street address of the business office of its registered agent, I be identical.
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
_	ure of an officer or director  Merilee France  Printed or typed name and little
I hereby accept I further agree of my duties, and document is be corporation ha	t the appointment as registered agent and agree to act in this capacity.  to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the is been notified in writing of this change.
If signing on b	ehalf 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
8/05)

CR2E045 (8/05)