DEAN, MEAD, SPIELVOGEL, GOLDMAN & BOYD

IOI SOUTH COURTENAY PARKWAY, SUITE 20I MERRITT ISLAND, FLORIDA 32952-4855 (407) 453-2333 FAX (407) 453-8641 7380 MURRELL ROAD, SUITE 100
MELBOURNE, FLORIDA 32940-7947
__(407) 259-8900
FAX (407) 254-4479

IOO RIALTO PLACE, SUITE 510
P. O. BOX 2228
MELBOURNE, FLORIDA 32902-2228
(407) 725-6373
FAX (407) 726-8477

N93000004124

EPLY TO:

Murrell Road

October 13, 1998

Secretary of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re: Baytree Community Association.

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002665575---8 -10/16/98--01067--013 ******35.00 *****35.00

Dear Sir or Madam:

Enclosed is Statement of Change of Registered or Registered Agent or Both for Corporations, along with this firm's operating account check #1028 payable to the Secretary of State in the amount of \$35.00 representing fees for filing same.

If you have any questions, please call. Thank you for your assistance.

Sincerely,

Laura H. Seguna,

Legal Assistant

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encl.

IN GRLANDO
DEAN, MEAD, EGERTON, BLOODWORTH,
CAPOUANO & BOZARTH, P. A.

(407) 841-1200

DEAN MEAD

IN FORT PIERCE
DEAN, MEAD & MINTON
(561) 464-7700 - (581) 562-7700

Florida Department of State, Sim Smith, Secretary of State

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, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1a. The name of the corporation is:-BAYTREE COMMUNITY ASSOCIATION, INC. N93000004124 9/14/93 1b. Date of incorporation Document number 2. The name and address of the current registered agent and office: R. M. Blake 7380 Murrell Rd., Suite 201, Viera, FL 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) Thomas A. Vani 400 High Point Drive, Suite 500, Cocoa, FL The street address of its registered agent 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. Typed or printed name and title HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 COM-PLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT. SIGNATURE

DATE

CR2E045 (7-91)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$35.00

OR COT IN DE LA