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Sentry Management_{ing}

2180 State Road 434 W Ste 5000 Longwood FL 32779-5044 140500 COBBLEFIELD RETURN SERVICE REQUESTED 000002551730--1 -06/08/98--01126--013 *****35.00 *****35.00

Office Use Only

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NonProfit	Resignation of R.A., (Officer/Director	-		
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OTHER FILINGS		ION		9	
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Florida Department of State, Sandra B. Mortham, 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 FLORIDA 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: _COBBLEFIELD HOMEOWNERS ASSOCIATION, INC. 1b. The mailing address of the corporation is: 2180 WEST SR 434 STE 5000 LONGWOOD FL 32779-5044 1c. Date of incorporation: 05/09/1994 _ Document number: N9400002389 The name and address of the current registered agent and office: LARRY GODWIN 1330 PALMETTO AVE WINTER PARK FL 32789 US 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) HOAL HISTA JAMES W. HART, JR. SENTRY MANAGEMENT, INC. 2180 WEST SR 434 STE 5000 LONGWOOD FL 32779-5044 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. (Signature of an officer chairman or vice chairman of the board) FREDL ZRIED, PRES (Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

| Signature of Registered Agent | Signature

JAMES W. HART, JR. PRESIDENT
(Typed or Printed Name) (Capacity)