## N94000003094

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT MAIL	
	(Business Entity Name)	
	(Document Number)	
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SECRETAIN OF STATE
ALLAHASSEE, FLORIDA

## **COVER LETTER**

	S Creek of Ocoee Homeowners As (Name of	f corporation)
DOCUMENT NU	MBER: N9400003094	
The enclosed State	ment of Change of Registered Of	fice/Agent and fee are submitted for filing.
Please return all co	prrespondence concerning this mat	ter to the following:
	Angela Middleton	
	(Name of c	contact person)
Lel	and Management Inc. (Firm/	Company)
<u> </u>	6972 Lake Gloria Blvd (A	ddress)
	Drando Fr (City/state	and zip code)
For further information	ation concerning this matter, pleas	
Angela Middleton	ame of contact person)	at (407 ) 781-1409 (Area code & daytime telephone number)
	00 check made payable to the Dep	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

TO:

Amendment Section Division of Corporations

## <u></u>

## 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, this statement of change is submitted for a corporation organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State of Florida.  1. The name of the corporation: Cross Creek of Ocoee Homeowners Association Inc
2. The principal office address: 6972 Lake Gloria Blvd , Orlando, FL 32809
3. The mailing address (if different):
4. Date of incorporation/qualification: 01/26/1995 Document number: N9400003094
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Spencer Solomon
13350 West colonial Drive Suite 330
Winter Garden FL 34787 US
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Leland Management Inc.
6972 Lake Gloria Blvd , Orlando, FL 32809
(P.O. Box NOT acceptable)
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, or the corporation has been notified in writing of the change.
(Signature of an officer or director)  David E. Coe President  (Printed or typed name and title)
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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Rebecca Furlow

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

(Typed or Printed Name)