N97000003599

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COVER LETTER

Division of Corporations Grey Oaks Homeowners Association, Inc. Name of Corporation N97000003599 DOCUMENT NUMBER:_ The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Helen Kelley Name of Contact Person Creative Management & Design, LLC Firm/Company 6014 US HWY 19 North, Suite 504 Address New Port Richey, FL 34652 City/State and Zip Code hkelley@creative-mgmt.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Helen Kelley Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address: Street Address:** Amendment Section Amendment Section **Division of Corporations Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

TO:

Amendment Section

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

statement of ch	provisions of sections 607.0302, 617. unge is submitted for a corporation or	ganized under the law	vs of the State of <u>F</u>	-lorida	
	er to change its registered office or reg		•		
	the corporation: Grey Oaks Ho				
2. The principal	office address: 6014 US HWY 19	N Suite 504, Ne	w Port Richey,	FL 34652	
3. The mailing	address (if different):				
4. Date of incor	poration/qualification: 06/23/19	97 Document n	umber: N	97000003599	
	d street address of the current registerer rtment of State: (If resigned, enter resi	~	d office on file with	h the	
	Resource Property Managme	ent			
	28100 US HWY 19 N, Ste. 3)5		34 S	
	Clearwater FL 33761			AR IN	
6. The name an (if changed):	d street address of the new registered a	gent (if changed) and	l /or registered offi	FILE PH	
	Helen Kelley			FIST	
	c/o Creative Management &			RICE S	
	P.O. Box NOT acceptable				
	6014 US HWY 19 N Suite 50		5.		
The street addr as changed wil	ess of its registered office and the str be identical.	eet address of the bu	siness office of its	registered agent,	
Such change wauthorized by t	as authorized by resolution duly ado he heard, or the corporation has been	pted by its board of of its notified in writing of	lirectors or by an of the change.	officer so	
Signati	re of an officer or director		FUSCO ed or typed name and titl	e	
oj my auties, ai document is be	the appointment as registered agent to comply with the provisions of all s nd I am familiar with and accept the ing filed merely to reflect a change is s been notified in writing of this chai	obligation of my pos n the registered offici	inon as regisierea	i ageni. Or. ii inis	
A.			06/16/09		
	gnature of Registered Agent		Date		
If signing on be	chalf of an entity:				
	Helen Kelley yped or Printed Name				

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