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ART & FRAME OF SARASOTA 1055 S. TAMIAMI TRAIL SARASOTA, FLOR**IDA 34236**

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NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R Change of Regist Dissolution/With Merger	L.A., Officer/Director tered Agent hdrawal	OF STATE ORPORATIONS
OTHER FILINGS Annual Report Fictitious Name	Foreign Limited Partners Reinstatement Trademark Other		hanse

Examiner's Initials (10),

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.

1.	The	name	of the	corporation	on :
				- or b or any	- AA 1

Shadow Oaks Estates Property Owners' Association, Inc.

- 2. The mailing address of the corporation: P.O. Box 1479, Sarasota, FL 34230
- 3. Date of incorporation/qualification: 4/22/98

Document number:

4. The name and address of the current registered agent and office:

Mario L. Comparetto 1800 Northgate Blvd., A-8 Sarasota, FL 34234

5. The name and address of the new registered agent (if changed) and/or registered office if changed):

(P. O. Box Not Acceptable)

Joel W. Walters 1515 Ringling Blvd., Suite 900 Sarasota, FL 34236

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 boa	rd of directors or by an
officer so authorized by the board. //	, /
Motal untout, Tres.	11/23/01
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Robert Antovel, Tres.	-
(Printed or typed name and title)	
Having been named as registered agent and to accept service of p	rocess for the above

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) (Date)

If signing on behalf of an entity:

Joel W. Walters (Typed or Printed Name)

(Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314