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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Southchase Parcels 40 and 45 Master Association, Inc. (Name of Corporation)		
DOCUMENT NUMBER: N98000003286		
The enclosed Statement of Change of Registered Office/Agent a	nd fee are submitted for filing.	
Please return all correspondence concerning this matter to the fo	llowing:	
Robert L. Taylor, (Name of Contact Pers	Esq.	
Taylor & Carls, F (Firm/Company)	P.A.	
150 N. Westmonte (Address)	Drive	
Altamonte Springs, (City/State and Zip Co	FL 32714de)	
For further information concerning this matter, please call:		
Robert L. Taylor, Esq. at ((Name of Contact Person) (A	407) 660-1040 rea Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Department of S	State.	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Southchase Parcels 40 and 45 Master Association, Inc.
2. The principal office address: 1801 COOK AVENUE, ORLANDO FL 32806-2913
3. The mailing address (if different):
4. Date of incorporation/qualification: 06/08/1998 Document number: N98000003286
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Robert L. Taylor, Esq.
850 Concourse Parkway, S, Suite 105
Maitland, FL 32751
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Taylor & Carls, P.A.
150 N. Westmonte Drive
(P.O. Box NOT acceptable) Altamonte Springs, FL 32714
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.
James W. Ellist - President (Signature of an orticer of director) Tames W. Ellist - 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: POSUT L. Taylor, as Snowthdow 4 Director

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

(Typed or Printed Name)