

N98000006284

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

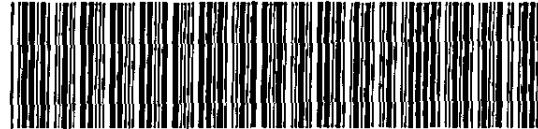
(Business Entity Name)

(Document Number)

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*RA change
T. Lewis*

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Silver Springs Village Property Owners Association
(Name of Corporation)

DOCUMENT NUMBER: N98000006254

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:

Chalmer Saylor
(Name of Contact Person)

Silver Springs Village Property Owners Association
(Firm/Company)

P.O. Box 1456
(Address)

Silver Springs, FL 34488-1456
(City/State and Zip Code)

For further information concerning this matter, please call:

Chalmer Saylor at (352) 625-2202
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of 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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

September 21, 2005

SILVER SPRINGS VILLAGE PROPERTY OWNERS
P. O. BOX 1456
SILVER SPRINGS, FL 34489-1456

SUBJECT: SILVER SPRINGS VILLAGE PROPERTY OWNERS ASSOCIATION,
INC.
Ref. Number: N98000006284

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 005A00057897

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: SILVER SPRINGS VILLAGE PROPERTY OWNERS ASSOC.
2. The principal office address: P.O. Box 1456
SILVER SPRINGS, FL 34488-1456
3. The mailing address (if different): _____

4. Date of incorporation/qualification: November 2, 1998 Document number: N9800006284

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

SHAWN LEARY
1039 S.E 173 CT
SILVER SPRINGS, FL 34488

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

TINA TERRELL
2005 S.E 174th CT
(P.O. Box NOT acceptable)
SILVER SPRINGS, FL 34488

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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.

Chalmer Saylor
(Signature of an officer or director)

Chalmer Saylor Treasurer
(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.

Tina Terrell
(Signature of Registered Agent)

9/29/05
(Date)

If signing on behalf of an entity:

Tina Terrell
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314