(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations—	<u>.</u> 34			
SUBJECT: Cypress Springs Village S Homeowners (Name of Corporation)	Association Inc			
DOCUMENT NUMBER: N99000003089				
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	ng:			
Anne M. Smith (Name of Contact Person)				
(Name of Contact Person)				
Pinnacle Property Manage	ment			
Pinnacle Property Manage (Firm/Company)				
1511 East State Road 434. Suite 3001				
1511 East State Road 434, Su (Address)	at it is the public			
Winter Springs, FL 32708				
Winter Springs, FL 327 Vin (City/State and Zip Code)				
For further information concerning this matter, please call:				
Marnina Thompson at (407 (Name of Contact Person) (Area Co) 977-0031 ode & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Stre	et Address:			
Marnina Thompson at (407 (Name of Contact Person) at (Area Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Amendment Section Amendment Section Division of Corporations) 977-0031 ode & Daytime Telephone Number) et Address: endment Section ision of Corporations ton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (8/05)

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statunge is submitted for a corporation organized under the laws of the State of Flor To change its registered office or registered agent, or both, in the State of Flori	rida	-
1. The name of	the corporation: Cypress Springs Village S Homeowners Association	n, Inc.	
2. The principal	office address: 1511 East State Road 434, Suite 3001 Winter Sprin	igs, FL 327	08
3. The mailing a	ddress (if different):		
4. Date of incor	poration/qualification: 5/14/1999 Document number: N9900000	3089	
	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	ie	
	Kevin Davis		
	1750 W Broadway St. Suite 220		
	Oviedo, FL 32765	墨 6	3
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	EGRETARY LAHASSE	5 7 7
	Pinnacle Property Management, LLC	ET ES	ĵ
	1511 East State Road 434, Suite 3001	AH II OO	
	(P.O Box NOT acceptable) Winter Springs, FL 32708	\$ 6 8	
The street addreas changed will	ess of its registered office and the street address of the business office of its rebe identical.	gistered agen	t,
Such change wa	as authorized by resolution duly adopted by its board of directors or by an offine board, or the corporation has been notified in writing of the change.	icer so	
A CHILLE	Base Marcy Plane (Printed or typed name and title)	۷	
I hereby accept I further agree of my duties, an document is bei corporation has	The appointment as registered agent and agree to act in this capacity. It comply with the provisions of all statutes relative to the proper and comple of I am familiar with and accept the obligation of my position as registered aging filed merely to reflect a change in the registered office address. I hereby of been notified in writing of this change.	te performan gent. Or, if th onfirm that th	ce is ie
amen	inguite of Registered Agent) (Date)		
If signing on be	half of an entity:		
(7	Anne M. Smith Typed or Printed Name)		

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