

361830

Requestor's Name

RUBY FRANKLIN

Requestor's Name

AVATAR PROPERTIES, INC.  
255 ANAHEIM CIRCLE

Address

CORAL GABLES, FL 33134

City/State/Zip

Phone #

Office Use Only

ER(S), (if known):

500002805305--1

-03/15/99--01019--001

\*\*\*1435.00 \*\*\*\*\*35.00

- 1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- Walk in
- Mail out
- Pick up time \_\_\_\_\_
- Will wait
- Certified Copy
- Certificate of \_\_\_\_\_
- Photocopy

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99 MAR 12 AM 9:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RO chg  
DRE  
3/18

Examiner's Initials

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

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 is: Poinciana New Township, Inc.

2. The mailing address of the corporation is: 201 Alhambra Circle, Coral Gables Florida, 33134

3. Date of incorporation/qualification: 3/27/70 Document number: 361830

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

Juanita I. Kerrigan
255 Alhambra Circle
Coral Gables, Florida 33134

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Juanita I. Kerrigan
201 Alhambra Circle
Coral Gables, Florida 33134

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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

Charles L. McNairy
(Signature of an officer, chairman or vice chairman of the board)

March 8, 1999
(Date)

Charles L. McNairy, President
(Printed or typed name and title)

March 8, 1999
(Date)

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.

Juanita I. Kerrigan
(Signature of Registered Agent)

March 8, 1999
(Date)

If signing on behalf of an entity:

(Typed or Printed Name) (Capacity)