## N.37644

OAKRIDGE MANAGEMENT, INC. 3501 W VINE ST SUITE 522 KISSIMMEE, FL 34741

City/State/Zip

Phone #

500004744595---7 -12/31/01--01045--001 \*\*\*\*\*35.00 \*\*\*\*\*\*35.00

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other  OTHER FILINGS			Amendment Resignation of R.A. Change of Registered Dissolution/Withdra Merger  ISTRATION/QUA	ed Agent awal	·
☐ Annual Report ☐ Fictitious Name			Foreign Limited Partnership Reinstatement Frademark Other		

CR2E031(7/97)

T. LEWIS JAN 8 2002

## \* 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 FLOREDA
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: WESMERE MAINTENANCE
ASSUCIATION, INC.
2. The mailing address of the corporation: 350/ W, VINE 5T SUITE 52;
KISSIMMEE, FL 34741
3. Date of incorporation/qualification: APRIZ 10, 1990 Document number: N 37644
4. The name and address of the current registered agent and office:
5. The name and address of the new registered agent (if changed) and/or registered office (if-changed):
(P. O. Box Not Acceptable)
DAKRIDGE MANAGEMENT LLC
3501 W. VINE ST SUITE 522
KISSIMME, FLORIDA 34741
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.
Mathan X Confel. 1 12-7-01
(Signature of an officer, chairman or vice chairman) of the board)  (Date)
Nathand. Conkling (Printed or typed name and title)
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.
Laid Smith
(Signature of Registered Agent)  (Date)
If signing on behalf of an entity:
DAVID SMITH PRESIDENT (Capacity)
* * * FILING FEE: \$35.00 * * *

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