## N94000003094

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## TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations		<u>-</u> <del>-</del>
SUBJ	UMENT NUMBER: N9400003099	109,11	1c.
DOC	UMENT NUMBER: N94 0000 3099	orporation	<u> </u>
	nclosed Statement of Change of Registered Off		
	SPEAUR R. GOLOMON	ter to the	following:
	(Name of person) SOUTHWGK PROPERTIES		<u> </u>
	(Name of firm/company) 2562 S. MAGURERO, #3	118	<del>-</del>
	(City/state and zip code)		<del></del>
	(City/state and zip code)		
	rther information concerning this matter, please PLNCKAR. SOLONON 41		656-1081 Edaytime telephone number)
•	(Name of person) (Ar	rea code &	daytime telephone number)
Enclos	sed is a \$35.00 check made payable to the Depa	artment c	of State.
Ameno Divisio P.O. B	ng Address: dment Section on of Corporations Sox 6327 assee, FL 32314  Street Address Amendment Se Division of Cor 409 E. Gaines S Tallahassee, FL	ction porations street	:- := :- :-

## 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
in order to change its registered office or registered agent, or both, in the state
of Florida.  1. The name of the corporation: CAOSS CALLY OF OCOCK WOME OWNERS ASSOCIATION.
2. The principal office address: 173 DESIREE AJRORA ST.
WINTER GAMOEN, FL 34787
3. The mailing address (if different): 2582 S. MAGNAL AV.
OCOKE, Fr 34761
4. Date of incorporation/qualification: 63794 Document number: N94000003099
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: R. GOVOMON
534 GOLVEN MOSS LOOP ES R
000年月34日
6. The name and street address of the new registered agent (if changed) and /or registered office (it changed): GRENUR R. GOVOTON
113 DESIREE PNAORAST. 智言
WINCER GROBOX OF PERSONAL mailbox NOT acceptable)
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.
(Signature of an officer, chairman or vice chairman of the board) (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 dities, and I am familiar with and accept the obligation of my position as resistered agent. Or, if this document is being filed merely to reflect a change in the registered office address, Thereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
SPENIER R. GOVOMON PROPERCY MANAGER
(Typed or Printed Name) (Capacity)

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