

N09456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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*RA Change
T. Lewis*

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05 MAY 16 PM 3:47
SECRETARY OF STATE
FALLS CHURCH, VA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Orange Manor East Mobile Home Owners Association Inc.
(Name of corporation)

DOCUMENT NUMBER: N09456

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:

LeRoy Eggleston

(Name of contact person)

(Firm/Company)

76 Murcott

(Address)

Winter Haven, Fl. 33884

(City/state and zip code)

For further information concerning this matter, please call:

LeRoy Eggleston

(Name of contact person)

at (863)

318-8907

(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
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 6, 2005

LEROY EGGLESTON
76 MURCOTT
WINTER HAVEN, FL 33884

SUBJECT: ORANGE MANOR EAST MOBILE HOME OWNER'S
ASSOCIATION, INC.
Ref. Number: N09456

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

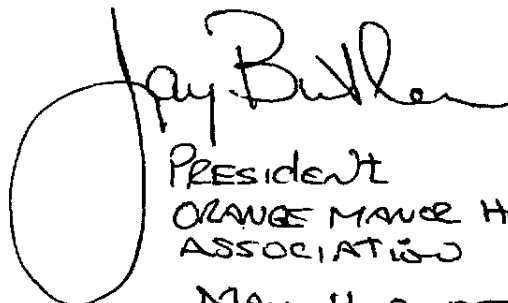
The fee to file your document is \$35.

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: 605A00032813

PLEASE CHANGE OUR REGISTERED AGENT FROM
TOM SIMMONS TO ROY EGGLESTON.
(LEGGESTON)


PRESIDENT
ORANGE MANOR HOME OWNER
ASSOCIATION

MAY 11, 2005

RECEIVED
05 MAY 16 AM 9:35
DIVISION OF CORPORATIONS

**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: Orange Manor East Mobile Home Owners Association Inc.
2. The principal office address: 93 Orange Manor Drive
3. The mailing address (if different): _____
4. Date of incorporation/qualification: May 24, 1985 Document number: N09456
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

TOM SNIDER
105 MURCOTT DR.

WINTER HAVEN, FL 33884

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

LeRoy Eggelston

76 Murcott

(P.O. Box NOT acceptable)

Winter Haven, FL. 33884

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05 MAY 16 PM 3:47
STATE DEPT. OF STATE
TALLAHASSEE, FL 32314

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.

Jay Butler
(Signature of an officer or director)

Jay L. Butler, Pres. O.M.E.H.O.A.
(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.

LeRoy Eggelston
(Signature of Registered Agent)

4/28/05

5-2-05
(Date)

If signing on behalf of an entity:

(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