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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Pine Ridge Hollow EAST Tomeowners Assoc. (Name of Corporation) INC
DOCUMENT NUMBER: N960000 6440
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:
Rosa I - Perez (Name of Contact Person)
Pine Ridge Hollow East Homeowners Assoc In
- 7731 Hidden Hollow DR (Address)
ORlando, FL 32822- (City/State and Zip Code)
For further information concerning this matter, please call:

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 FLOYIA or in order to change its registered office or registered agent, or both, in the State of Florida.
	$\Lambda \cdot R / F = 1$
	1. The name of the corporation: Pine Midge E. AST Homeowners Hesoc. INC
•	2. The principal office address: 274 Wilshire BLVD, Ste 288 Casselberty,
hame	Toi
	3. The mailing address (if different):
hang	2 10:
\mathcal{O}	4. Date of incorporation/qualification: 12-16-1996 Document number: N 96 00000 6440
	5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
	RA NAME Flarent, INC. 274 Wilshire BLUD, Ste 282
	Casselberry FL32707
	Registered Agent: Geoffrey IN. Hall
	6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
	Rosa T. Perez 58 3 T
	7731 Hidden Hollow DR & & T
	(P.O. Box NOT acceptable) PC 31837
	CHURD, FC Joseph N. O
	The street address of its registered office and the street address of the business office of its resint 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 or director Person 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.
	= (oxal Per 9/26/06
	(Signature of Registered Agent)
	If signing on behalf of an entity:
	(Typed or Printed Name)

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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