

N 05000006023

B. Ganspersa D  
6341 SE 80<sup>th</sup> CT  
Ocala FL 34472

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA CRY  
4-26-07

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

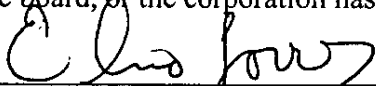
Pursuant to the provisions of Sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida:

1. The name of the corporation is: TURNING LEAF HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: 6341 S. E. 80<sup>th</sup> Court, Ocala, FL 34472
3. The mailing address (if different): P.O. Box 830572, Ocala, FL 34483-0572
4. Date of Incorporation/qualification: 06-10-2005 Document Number: N05000006023
5. The name and street address of the current registered agent and registered on file with the Florida Department of State: Warren E. Daniels, 821 N.E. 36<sup>th</sup> Terrace, #6, Ocala, FL 34470
6. The name and street address of the new registered agent (if changed) and/or registered office:

Briganand Gangapersaud  
6341 S. E. 80<sup>th</sup> Court  
Ocala, FL 34472

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 or director)

Elmo Torres (President)  
(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 property 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.

  
(Signature of Registered Agent)

04-25-07  
(Date)

Briganand Gangapersaud  
(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

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