## N32137

(Red	questor's Name)			
(Address)				
(Add	dress)			
(City	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



600182604346

07/01/10--01040--017 \*\*105.00

SECRETARY OF STATE

R.A.

TR JUL - 7 2010

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT:	Windsor Hill Homeowi	ners Association			
Sebele 1.	Name of Co	rporation			
DOCUMENT NUMI	BER:	32137			
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:					
_	Spencer S Name of Con	Solomon tact Person			
Southwest Property Management Firm/Company					
	ritii/Co.	прапу			
13350 West Colonial Dr Suite 330 Address					
Winter Garden, FL 34787 City/State and Zip Code					
swpmgmt@aol.com  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
	encer Solomon	at ( 407 ) Area Code & Daytir	656-1081		
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 Se Division of Co Clifton Buildin 2661 Executive	rporations g		

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flor inge is submitted for a corporation organized under the laws of the State or to change its registered office or registered agent, or both, in the State	of Florida
1. The name of	the corporation: Windsor Hill Homeowners Association	, Inc.
	office address: 13350 West Colonial Dr Suite 330, Winter Ga	•
3. The mailing a	address (if different): PO Box 783367, Winter Garden, FL 347	78
4. Date of incorp	poration/qualification: 5/5/1989 Document number:	N32137
	I street address of the current registered agent and registered office on fil tment of State: (If resigned, enter resigned)	e with the
	Community Management Professionals, Inc.	
	RESIGNED	2010 TAL
		2010 JUL -1
6. The name and (if changed):	istreet address of the new registered agent (if changed) and /or registered	(a) 2/2
	Spencer Solomon	DR S
	13350 West Colonial Dr Suite 330	
	P.O. Box NOT acceptable	<del></del>
	Winter Garden, FL 34787	
The street address changed will	ess of its registered office and the street address of the business office be identical.	of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or be board, or the corporation has been notified in writing of the change	y an officer so
Signatur	re of an officer or director Printed or typed name	and title
I further agree to of my duties, an document is bein corporation has	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and a lamiliar with and accept the obligation of my position as regising fixed merely to reflect a change in the registered office address, I have been notified in writing of this change.  Date	complete performance tered agent. Or, if this tereby confirm that the
[.]	half of an entity:	
T	yped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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