

N19724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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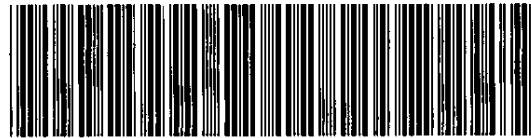
(Business Entity Name)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KING OAK VILLAS HOMEOWNERS' ASSOC., INC.
Name of Corporation

DOCUMENT NUMBER: N19724

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:

DONNIE MARTINEZ
Name of Contact Person

BLUE WATER COMMUNITY MANAGEMENT, LLC
Firm/Company

2021 13TH STREET
Address

SAINT CLOUD, FL 34769
City/State and Zip Code

DONNIE@MYBLUEWATERREALTY.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AL BOWMAN at (407) 343-0809 EXT 104
Name of Contact Person 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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.

- CR2E045 (8/05)

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10 AUG 13 AM 11:09