

N02000009366

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*R.A. Chery*  
C.COULLETTE

JAN 27 2011

EXAMINER

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: LAKE SIDE AT TAVARES ASSOCIATION, INC.  
Name of Corporation

DOCUMENT NUMBER: N02000009366

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:

Derek A. Schroth  
Name of Contact Person

Bowen Radson Schroth, P.A.  
Firm/Company

600 Jennings Avenue  
Address

Eustis, FL 32726  
City/State and Zip Code

dschroth@brslegal.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Derek A. Schroth at ( 352 ) 589-1414  
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

**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: Lakeside at Tavares Association, Inc.
2. The principal office address: 3848 Bayshore Circle  
Tavares, FL 32778
3. The mailing address (if different): P.O. Box 1903  
Tavares, FL 32778
4. Date of incorporation/qualification: 12/05/2002 Document number: N02000009366
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Welke, Brian J. PA

531 North Bay Street

Eustis, FL 32726 US

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

Derek A. Schroth, Bowen Radson Schroth, P.A.

600 Jennings Avenue

P.O. Box NOT acceptable

Eustis, FL 32726

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.

Thomas H. Doran  
Signature of an officer or director

Thomas H. Doran  
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.*

Derek A. Schroth  
Signature of Registered Agent

1/21/11  
Date

If signing on behalf of an entity:

Bowen Radson Schroth, P.A.

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

CR2E045 (8/05)

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