NA4185

Office Use Only



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COVER LETTER

	mendment Section ivision of Corporations		
SUBJECT	Timucua Village Neighborhood Asso	ciation, Inc.	
SOBOLCI	Name of Cor	poration	······································
DOCUMI	N24185 ENT NUMBER:		·
The enclos	sed Statement of Change of Registered Office/	Agent and fee a	are submitted for filing.
	urn all correspondence concerning this matter t	•	_
	Robert Taylor		
	Name of Conta	act Person	
	Becker & Poliakoff		
Firm/Company			
111 N. Orange Ave. Suite 1400			
Address Orlando, FL 32801			
	City/State and	Zip Code	
	E-mail address: (to be used for fut	ture annual rep	port notification)
For furthe	r information concerning this matter, please ca	ıll:	
Robert ⁻	Taylor	407 at (875-0955
	Name of Contact Person	Area Code	e & Daytime Telephone Number
Enclosed i	is a \$35.00 check made payable to the Departm	nent of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amen Divisi Clifto 2661	Address: dment Section on of Corporations n Building Executive Center Circle
		i ailai	nassee, FL 32301

TO:

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, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida rto change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Timucua Village Neighborhood Association, Inc.
	office address: 14101 Town Loop Blvd.
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 12/31/1987 Document number: N24185
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Robert Taylor
	150 N. Westmonte Drive
	Altamonte Springs, FL 32714
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Becker & Poliakoff P.A. 111 N. Orange Ave. Suite 1400
	P.O. Box NOT acceptable
	P.O. Box NOT acceptable Orlando, FL 32801 P.O. Box NOT acceptable Orlando, FL 32801
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	is authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
Celer	Usederule KICHACO (ALXERALE PRESIDENT
I hereby accept I further agree -performance of agent. Or, If th hereby confirm	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 complete The duties, and I am familiar with and accept the obligation of my position as registered The document is being filed merely to reflect a change in the registered office address, I That the corporation has been notified in writing of this change.
MC Sig	nature of Registered Agent 4915
	half of an entity:
Robert Taylo	or, Shareholder
	used or Printed Name

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