725926

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RYOF STATE Change of the Chang

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJI	ECT: Highlands Homeowners Association, Inc. (Name of Corporation)
DOCU	MENT NUMBER: 725926
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Robert L. Taylor, Esq. (Name of Contact Person)
	Taylor & Carls, P.A. (Firm/Company)
	150 N. Westmonte Drive(Address)
	Altamonte Springs, FL 32714 (City/State and Zip Code)
For fur	ther information concerning this matter, please call:
	Robert L. Taylor, Esq. at (407) 660-1040 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclos	ed 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stat ange is submitted for a corporation organized under the laws of the State of Flo er to change its registered office or registered agent, or both, in the State of Flor	orida	<u></u>	
	the corporation: Highlands Homeowners Association, Inc.			
	office address: 2200 Shepard Road, Winter Springs, FL 32708			
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 03/27/1973 Document number: 725926			
	d street address of the current registered agent and registered office on file with artment of State: (If resigned, enter resigned)	the		
	Neal McCulloh			
	1065 Maitland Center Commons Blvd.	_		
	Maitland, FL 32751	ATT.	. 60	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office Taylor & Carls, P.A.	RETARY OF	JAN 26 AF	
		FI.O	AH II:	
•	(P.O. Box NOT acceptable)	AIE	05	
	Altamonte Springs, FL 32714	41,		.*
=	ress of its registered office and the street address of the business office of its i I be identical.			ι,
Such change wauthorized by f	vas authorized by resolution duly adopted by its board of directors or by an or the board, or the corporation has been notified in writing of the change.	fficer so		
//	Janet Megow, Presidence of the director) Janet Megow, Presidence of typed name and title	-		-
of my duttes, at document is be	t the appointment as registered agent and agree to act in this capacity. In comply with the provisions of all statutes relative to the proper and comp Ind I am familiar with and accept the obligation of my position as registered Ling filed merely to reflect a change in the registered office address, I hereby The property of this change.	lete perj agent. (confirm	forman Or, if th that th	ce iis ie
	Signature of Registered Ascnit) (Date)			*
<u>Kober</u>	rehalf of an entity: It L. Taylor: Dy 1 Sec (Typed or Printed Name), 1			
٠	* * * 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)