## 72.9748

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Machanse Mewis 6-20-08

## GEURGE TOWN

2661 Executive Center Circle

Tallahassee, FL 32301

COVER LETTER  Property #: 306 Vendor #:
TO: Amendment Section Division of Corporations  Amendment Section Division of Corporations  Approval: Date: 6-72-0
SUBJECT: Five Towns of St. Petersburg, No. 306, Inc. (Name of Corporation)
DOCUMENT NUMBER: 729748
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:
Robert KRESNIK  (Name of Contact Person)
FCPM LLC (Firm/Company)
81\$1 54 <sup>th</sup> AVE W. (Address)
St Paters 6 649 F1 33709 (City/State and Zip Code)
For further information concerning this matter, please call:
Rob tat Krenik at (727) 258-0092  (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  Street Address: Amendment Section Division of Corporations Clifton Building

Tallahassee, FL 32314

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

statement of change is submitted for a corporation organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: FING TOWNS OF ST. Peters bung, NO. 306,
1. The name of the corporation: FIVE TOWNS OF ST. Peters 6405, NO. 306, 2. The principal office address: 5623 80#54 N
- St Petinsbuay, 1-1 33709
3. The mailing address (if different):
4. Date of incorporation/qualification// 23, 1974 Document number: 729748
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
KESUNREE Physics MANAGEMEN
7300 PARK SK, 18 18 18 17
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Robert KREINIK & FCPM LLC
8141 547H Auc N- (P.O. Box NOT acceptable)
St. Petersbung, Fl. 33705
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.
Hoting Museuler ger HATRICIA M. Kosenberger (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.
(Signature of Registered Agent)  (Date)
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

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