732582

(Re	questor's Name)	
(Ad	dress)	
(Address)		
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



400185483504

09/17/10--01014--005 **35.00

10 SEP 17 AMII: 10

RARDICHS Majorillo

COVER LETTER

Division of Corporations			
SUBJECT: Park Lake Towers Condominium Assn, Inc.			
DOCUMENT NUMBER: 732582			
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:			
Name of Contact Person			
Firm/Company			
400 E Colonial Drive Address			
Orlando 7L 32803 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Apel Lindsey Mant Desk at (H07) H25 H277 Name of Contact Person at (H07) H25 H277 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Amendment Section Street Address: Amendment Section			

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

runsuant 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 7/00 da
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Park Lake Towers Condominium ASSN, Inc.
2. The principal office address: HOO E COLONIAL Drive
Orlando, 7h 32803
3. The mailing address (if different):
4. Date of incorporation/qualification: 4/11/2/1975 Document number: 732582
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)
Fuclow Rebecca
6972 Lake Gloria Blud
Orlando, 7h 32809
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
John J Lindsey 5
HOO E Colonial Drive P.O. Box NOT acceptable Orlando, 7L 32803
P.O. Box NOT acceptable Orlando, 7L 32803
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 of the corporation has been notified in writing of the change.
A John Ji Lind G Printed or typed name and title
Increby accept the appointment as registered agent and agree to act in this capacity. If arther 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.
X MM 9/14/10
Signature of Registered Agent [Pate
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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