134250

| (Requestor's Name) | | | | | |
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| (Address) | | | | | |
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| (Address) | | | | | |
| · , | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| (Only Old Or Elph Holle II) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| | | | | | |
| (Business Entity Name) | | | | | |
| | | | | | |
| (Document Number) | | | | | |
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| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer: | | | | | |
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TSCHROEDER

COVER LETTER

| SUBJECT: Winding Wood Condominium III Association, Inc. | | | | | |
|---|--|--|--|--|--|
| Name of Corporation | | | | | |
| DOCUMENT NUMBER: 734250 | | | | | |
| 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: | | | | | |
| Donna Miraglia, LCAM | | | | | |
| Name of Contact Person | | | | | |
| First Choice Association Management | | | | | |
| Firm/Company | | | | | |
| 4174 Woodland Parkway | | | | | |
| Address | | | | | |
| Palm Harbor, Florida 34685 | | | | | |
| City/State and Zip Code | | | | | |
| Donna@firstchoicemetro.com | | | | | |
| E-mail address: (to be used for future annual report notification) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| Donna Miraglia | | | | | |
| Name of Contact Person at (1277656687) Area Code & Daytime Telephone Number | | | | | |
| Enclosed is a \$35.00 check made payable to the Department of State. | | | | | |
| Mailing Address: Street Address: Amendment Section Amendment Section | | | | | |

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

CR2E045 (03/12)

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

| statement of ch | e provisions of sections 607.0502 nange is submitted for a corporate ler to change its registered office | ion organized under the laws of t | he State of Florid | la |
|--|--|---|--|---|
| 1. The name of | Tthe corporation: Winding W | ood Condominium III A | ssociation, | Inc. |
| | al office address: First Choice oodlands Parkway, Pal | | | |
| 3. The mailing | address (if different): | | | |
| 4. Date of incom | rporation/qualification: 11/04/ | Document number | 734250 | |
| | nd street address of the current reartment of State: (If resigned, ent | | ce on file with th | e |
| | Property Managemer | it by Design, Inc Resi | igned | |
| | 2708 Alt 19 North Sui | te 604-1 | | <u>س</u> ــــــــــــــــــــــــــــــــــــ |
| | Palm Harbor, FL 3468 | 33 | | F1L 19 0CT 21 5% (***) |
| 6. The name an (if changed): | nd street address of the new regis: | tered agent (if changed) and /or re | egistered office | FILED 19 OCT 21 AM 9: 28 PALPARAMETER TO BENEVA |
| | Margaret Nolan | | |) 1 9: 28 1 9: 38 h |
| | 4174 Woodlands Parl | kway | | 2.8 |
| | Palm Harbor, Florida | O. Box NOT acceptable 34685 | | |
| The street addr | ress of its registered office and t ll be identical. | he street address of the business | office of its regi | istered agent, |
| Such change wanthogized by t | vas authorized by resolution duly the board, or the corporation has | y adopted by its board of directo s been notified in writing of the | rs or by an office | er so |
| A Lebra | fure of an officer or different | Debra C | ed name and title | President |
| I further agree performance o agent, Or, if th | of the appointment as registered to comply with the provisions of my duties, and I am familiar whis document is being filed mere that the corporation has been to the corp | f all statutes relative to the prop ith and accept the obligation of ly to reflect a change in the regi | per and complete mv position as r isiered office add | egistered |
| - U Si | gnature of Registered Agent | <u> </u> | Pate | |
| If signing on bo | ehalf of an entity: | | | |
| • | Typed or Printed Name | <u> </u> | | |

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