

741369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature and initials
4/23/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SHADY OAKS OWNERS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: 741369

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:

ELLEN HIRSCH DE HAAN, ESQ.
Name of Contact Person

BECKER & POLIAKOFF, P.A.
Firm/Company

311 PARK PLACE BLVD, SUITE 250
Address

CLEARWATER, FL 33759
City/State and Zip Code

toby.aldrich@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charlotte Toth, Legal Assistant at (727) 712-4000
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
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**

Pursuant 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SHADY OAKS OWNERS ASSOCIATION, INC.
2. The principal office address: 3651 CASTLE DRIVE, ZEPHYRHILLS, FL 33540
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/17/1978 Document number: 741369

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)

ROBERT L. ALDRICH

38542 MONET DRIVE

ZEPHYRHILLS, FL 33540

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

BECKER & POLIAKOFF, P.A.

311 PARK PLACE BLVD, SUITE 250

P.O. Box NOT acceptable

CLEARWATER, FL 33759

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.

Robert L. Aldrich, President
Signature of an officer or director

Robert L. Aldrich
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.

Ellen Hirsch de Haan
Signature of Registered Agent

April 17, 2012
Date

If signing on behalf of an entity:

ELLEN HIRSCH DE HAAN

Typed or Printed Name

*** 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)

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