

11/04/2011 14:42 SHUMAKER LOOP & KENDRICK

(FAX) 813 229 1660

P.001/002

Florida Department of State
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REGISTERED AGENT CHANGE

PELICAN ISLAND PROPERTY OWNERS ASSOCIATION, INC.

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|-----------------------|---------|
| Certificate of Status | 0 |
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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 617.1503, 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: Pelican Island Property Owners Association, Inc.
2. The principal office address: 7000 Pelican Island Drive, Tampa, FL 33634
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/10/1978 Document number: 741590
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)

Bobby L. Hollis7119 Pelican Island DriveTampa, FL 33634-7461

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

Jonathan J. Ellis, Esq.c/o Shumaker, Loop & Kendrick, LLP101 E. Kennedy Blvd., Suite 2800P.O. Box NOT acceptableTampa, Florida 33602

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.

Taina Broes, Director
Signature of an officer or director

Taina Broes, DirectorPrinted 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]
Signature of Registered Agent

11/4/11
Date

If signing on behalf of an entity:

Typed or Printed Name

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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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