Division of Corporations rision of Corporations Electronic Filing Cover Sheet

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> > (((H16000235068 3)))



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To:

Division of Corporations

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From:

Account Name

: KLETT, MESCHES & JOHNSON,

Account Number: I20130000032

Fax Number

: (561)624-8202 : (561)621-8303

**Enter the email address for this business entity to be used for fu annual report mailings. Enter only one email address pleasent

REGISTERED AGENT CHANGE FOXWOOD ESTATES PROPERTY OWNERS ASSOCIATION INC.

Certificate of Status	0
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Estimated Charge	\$35.00



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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 617.1508, 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: Foxwood Estates Property Owners Association, Inc.
2. The principal office address:
3. The mailing address (if different):
4. Date of incorporation/qualification: 7/12/78 Document number: 743559
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)
Klett, Mesches & Johnson, P.L.
2855 PGA Boulevard, Suite 100
Palm Beach Gardens, FL 33410
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Klett, Mesches & Johnson, P.L.
4400 PGA Boulevard, Suite 304
P.O. Box NOT acceptable Palm Beach Gardens, FL 33410
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.
Signature of an officer or director 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 futies, and I am familiar with and accept the obligation of my position as registered agint. Or, if the document is being filed morely 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 9 Jac 55
If signing on benalf of an entity:
Larry M. Mesches
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 (03/12)

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