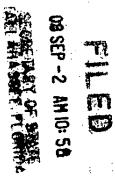
747579

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09/02/08--01013--018 **35.00



RAGIOS 19/08

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: Escondido Community Association (Name of Co	n, Inc.
DOC	UMENT NUMBER: 747579	
The er	nclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter t	to the following:
	Peter R. McGrath, Esq. (Name of Cont	act Person)
	Peter R. McGrath, P.A. (Firm/Con	npany)
	801 North Magnolia Avenue, Suit (Addre	
	Orlando, FL 32803	
	(City/State and	Zip Code)
For fur	ther information concerning this matter, please ca	11;
Peter	R. McGrath, Esq. (Name of Contact Person)	at (407) 872-7010 (Area Code & Daytime Telephone Number)
Enclos	ed is a \$35.00 check made payable to the Departm	nent 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: Escondido Community Association, Inc.		
The principal office address: 20 Escondido Circle Altamonte Springs, FL 32701 US		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 06/11/1979 Document number: 747579		
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:		
Becker & Poliakoff, P.A., Attn: Chris A. Draper, Esq.		
2500 Maitland Center Parkway, Suite 209		
Maitland, FL 32751 US		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
Peter R. McGrath, Esq.		
801 North Magnolia Avenue, Suite 317		
(P.O. Box NOT acceptable) Orlando, FL 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, or the corporation has been notified in writing of the change.		
John Schmid JOHN SCHMID, TREASURE, (Signature of an officer or director)		
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.		
Rignature of Registered Agent) 8/2 7/08 (Date)		
If signing on behalf of an entity:		
(Typed or Printed Name)		

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