

749560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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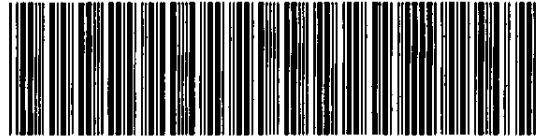
(Business Entity Name)

(Document Number)

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09 NOV 19 AM 10:12

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@ 11/19/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Terrace Park of Five Towns #17
Name of Corporation

DOCUMENT NUMBER: 749580

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:

Kyle Hunter
Name of Contact Person

Florida Community Property Management
Firm/Company

8111 54th Ave. N
Address

ST. Petersburg FL 33709
City/State and Zip Code

Khunter@Fcpm.biz
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kyle Hunter at (727) 258-0092 EXT. 203
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 10, 2009

KYLE HARTER
FLORIDA COMMUNITY PROPERTY MANAGEMENT
8141 54TH AVE. N.
ST. PETERSBURG, FL 33709

SUBJECT: TERRACE PARK OF FIVE TOWNS, NO.17, INC.
Ref. Number: 749560

We have received your document for TERRACE PARK OF FIVE TOWNS, NO.17, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 609A00035303

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Terrace Park of Five Towns #17, INC.
2. The principal office address: 5980 80th Street N.
ST. Petersburg FL 33709
3. The mailing address (if different): 8141 54th Ave. N
ST. Petersburg FL 33709
4. Date of incorporation/qualification: Oct. 30, 1979 Document number: 7419520
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)

~~Buxton Properties~~ Qualified Property Management, inc.
~~147 N Belcher RD.~~ 1301 Seminole Blvd, Suite, 110
~~Largo, FL 33773~~ Largo, FL 33770

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

Florida Community Property Management LLC
8141 54th Ave. N
P.O. Box NOT acceptable
ST. Petersburg FL 33709

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.

Carl D. Amann
Signature of an officer or director

CARL D. AMANN
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.

[Signature]
Signature of Registered Agent

10-22-09
Date

If signing on behalf of an entity:

Typed or Printed Name

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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