

751749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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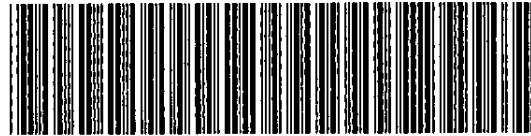
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR 19 PM 1:00

R.A. Rolch
@ 3/22/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TREE TOPS HOMEOWNERS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: 751749

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:

Kathy E. Healy
Name of Contact Person

Tree Tops Homeowners Association, Inc.
Firm/Company

P.O. Box 1405
Address

Loxahatchee, FL 33470-1405
City/State and Zip Code

kehealy@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy E. Healy at (561) 281-5412
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: Tree Tops Homeowners Association, Inc.

2. The principal office address: 380 Park Forest Way, Wellington, FL 33414-4976

3. The mailing address (if different): P.O. Box 1405, Loxahatchee, FL 33470-1405

4. Date of incorporation/qualification: 03/27/1980 Document number: 751749

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)

McLaughlin & Stern
525 Okeechobee Blvd., Suite 1530
West Palm Beach, FL 33401

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

Rutherford Mulhall, P.A.
3399 PGA Blvd., Suite 240
P.O. Box NOT acceptable
Palm Beach Gardens, FL 33410

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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.

Kathy E. Healy
Signature of an officer or director

Kathy E. Healy, President
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

3-15-12
Date

If signing on behalf of an entity:

Larry M. Mesches
Typed or Printed Name

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