

753772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

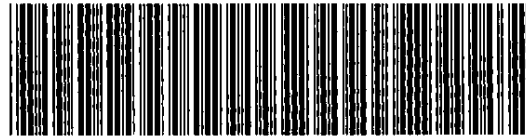
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only

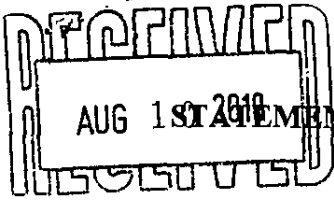


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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AUG 1 2010

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED  
AGENT  
OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 617.0502, 607.0502, 617.1508, or 607.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Winding Creek Condominium Corporation
2. The mailing address of the corporation is: 7300 Park Blvd.  
Seminole, FL 33777

3. Date of incorporation/qualification: Aug. 1980 Document No.: 753772

4. The name and address of the current registered agent and office:

SEABOARD ARBORES MGMT.  
HENRIED LEIGHTON  
2189 CLEVELAND ST., Suite 225  
CLEARWATER, FL 33765

5. The name and address of the new registered agent and office (P.O. Box not acceptable)

DEBRA REINHARDT  
Resource Property Mgmt., Inc.  
7300 PARK BLVD.  
SEMINOLE, FL 33777

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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.

Signature of officer or chairman of the board

LEE ALEXANDER COSTACHE

Printed or typed name and title

Date

8/9/10

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. If 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.

Signature of registered agent

If signing on behalf of an entity:

Date

8/30/10

Typed or printed name

Capacity

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

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314