## 755237

| (Requestor's Name)                      |  |  |  |
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| (Business Entity Name)                  |  |  |  |
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| (Document Number)                       |  |  |  |
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| Certified Copies Certificates of Status |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |
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DIVISION OF CORPORATION

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

TOWNHOMES OF BIGTREE ASSOCIATION INC. Name of Corporation

DOCUMENT NUMBER:

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:

Marlene L. Kirtland

Name of Contact Person

Community Association Law Group

Firm/Company

157 E. New England Ave. Suite 340

Winter Park, FL 32789

City/State and Zip Code

mkirtland@thehoalawyer.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marlene L. Kirtland

Name of Contact Person

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

| statement of ch   | e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute angle is submitted for a corporation organized under the laws of the State of Florida statute of Florida | a                   | _    |
|---|---|---------------------|------|
| 1. The name of  | fer to change its registered office or registered agent, or both, in the State of Florida<br>the corporation: TOWNHOMES OF BIGTREE ASSOCIATION<br>al office address: 10462 Bigtree Circle East, Jacksonville, FL 32   | INC.                |      |
| 3. The mailing  | address (if different): P.O. Box 56516, Jacksonville, FL 32241  |                     |      |
| 4. Date of incor  | rporation/qualification: 11/21/1980 Document number: 755237   |                     |      |
|   | nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)  Charles Klein   | ;                   |      |
|   | 10392 Big Tree Circle West  |                     |      |
|   | Jacksonville, FL 32257  | 14 AUG              |      |
| 6. The name an (if changed):  | nd street address of the new registered agent (if changed) and /or registered office:  Community Association Law Group  | 25                  |      |
|   | 157 E. New England Ave. Suite 340   |                     |      |
|   | P.O. Box NOT acceptable Winter Park, FL 32789   | 29                  | G.C. |
| The street addr<br>as changed wil   | ress of its registered office and the street address of the business office of its registle to identical.   | stered age          | :nt, |
| Such change w authorized by t   | vas authorized by resolution duly adopted by its board of directors or by an office the board, or the corporation has been notified in writing of the change.   | r so                |      |
| Signat  | tun-oran officer or director  Chaylog Klein  Printed or typed name and title  |                     | _    |
| I hereby accept<br>I further agree<br>performance of<br>agent. Or, if the<br>hereby confirm | of the appointment as registered agent and agree to act in this capacity.<br>The to comply with the provisions of all statutes relative to the proper and complete<br>If my duties, and I am familiar with and accept the obligation of my position as re<br>his document is being filed merely to reflect a change in the registered office add<br>In that the corporation has been notified in writing of this change.  | gistered<br>ress, I |      |
| Stu   | 8-13-14  Ignature of Registered Agent  Date   |                     | _    |
|   | schalf of an entity:  |                     |      |
| ı I   | Kutland Esq   |                     |      |

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (03/12)

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

Typed or Printed Name