

755787

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

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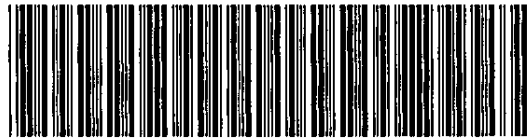
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

JUN 11 2012  
T. ROBERTS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Persimmon Place Homeowners Association  
Name of Corporation

**DOCUMENT NUMBER:** 755787

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:

Merrie Beth Lane

Name of Contact Person

Persimmon Place Homeowners Association  
Firm/Company

232 N. Ridgewood Ave #5  
Address

Edgewater, FL 32132  
City/State and Zip Code

Merriebl39@aol.com

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

For further information concerning this matter, please call:

Merrie Beth Lane

Name of Contact Person

at ( 386 ) 428-4496

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, 607.0502, 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: Persimmon Place Homeowners' Association, Inc.
2. The principal office address: 232 N. Ridgewood Ave, Edgewater,  
FL 32132
3. The mailing address (if different): P.O. Box 1450 Edgewater FL 32132
4. Date of incorporation/qualification: 01/17/1981 Document number: 755787
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)

James Kosmas  
111 Live Oak St.  
New Smyrna Beach, FL 32168

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

Robert Kramer  
555 W. Granada Blvd  
P.O. Box NOT acceptable  
Ormond Beach, FL 32174

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.

Merrin Beth Lane  
Signature of an officer or director

Merrin Beth Lane, Treasurer  
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.*

Robert E. K  
Signature of Registered Agent

6/5/2012  
Date

If signing on behalf of an entity:

Robert E. Kramer  
Typed or Printed Name

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

**FILED**  
**JUN -8 PM 4:50**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**