756376

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COVER LETTER

TO:

Amendment Section Division of Corporations

GREEN VALLEY ESTATES VILLAS ASSOCIATION, INC.

Name of Corporation

DOCUMENT NUMBER:

756376

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:

JOSEPH R. CIANFRONE, ESQ.

Name of Contact Person

JOSEPH R. CIANFRONE, P.A.

Firm/Company

1964 BAYSHORE BOULEVARD, SUITE A

Address

DUNEDIN, FL 34698

City/State and Zip Code

joe@attorneyjoe.com

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

For further information concerning this matter, please call:

JOSEPH R. CIANFRONE, ESQ.

(121)

738-1100

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: GREEN VALLEY ESTATES VILLAS ASSOCIATION, INC.
2. The principal	office address: 28100 US HWY 19 N., #205
	CLEARWATER, FL 33761
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 02/16/1981 Document number: 756376
	I street address of the current registered agent and registered office on file with the trment of State: (If resigned, enter resigned)
	RABIN PARKER, P.A.
	28163 US HWY 19 N., SUITE 207
	CLEARWATER, FL 33761
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	JOSEPH R. CIANFRONE, P.A.
	1964 BAYSHORE BOULEVARD, SUITE A
	P.O. Box NOT acceptable DUNEDIN, FL 34698
The street addre	ess of its registered office and the street address of the business office of its registered agent.
Such change was authorized by the	as anthorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Signatur	eny W. Kalor HARRY W. Perlow Resident
I hereby accept I further agree to performance of	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the dorpgration has been notified in writing of this change.
M/Sigr	Date 2/24/2014
If signing on bel	half of an entity:
,	CIANFRONE
Ту	ped or Printed Name

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