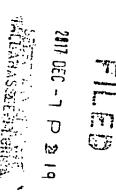
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COVER LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT: Russelwood Condominium Association, Inc.
Name of Corporation
758397

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:

Charles Evans Glausier

Name of Contact Person

Glausier Knight, PLLC

Firm/Company

400 N. Ashley Drive, Ste. 2020

Address

Tampa, FL 33602

City/State and Zip Code

cg|ausier@glausierknight.com

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

For further information concerning this matter, please call:

Charles Evans Glausier

,813 440-460

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

CR2E045 (03/12)

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

	- 11	s of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
	I	bmitted for a corporation organized under the laws of the State of Florida
	[]	ge its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corpo	Russellwood Condominium Association, Inc.
2. The principal office address: 17824 N. US Hwy 41, Lutz, FL 33549		dress: 17824 N. US Hwy 41, Lutz, FL 33549
z. the principal		
3. The mailing a	address (it	different):
4. Date of incor	poration/c	jualification: 05/18/1981 Document number: 758397
		dress of the current registered agent and registered office on file with the
Florida Depa		State: (If resigned, enter resigned)
	Charle	es Evans Glausier
	1801	N. Highland Avenue
	Tamp	a, FL 33602
		a, FL 33602
	d street ad	dress of the new registered agent (if changed) and /or registered office
400	اً داده داد	
	Chane	es Evans Glausier
	400 N	Ashley Dr., Suite 2020
	_	P.O. Box NOT acceptable
	Tamp	a, FL 33602
The street address changed will	ess of its i	egistered office and the street address of the business office of its registered agent, cal.
-	i	
	he board.	zed by resolution duly adopted by its board of directors or by an officer so or the corporation has been notified in writing of the change.
/S/ Mailer	rcsch	Marlene Schlangen, President
Signatu	re of an offic	1
l further agree .	to compli	intment as registered agent and agree to act in this capacity. with the provisions of all statutes relative to the proper and complete
perjormance of agent. Or, if th	my auries is docume	s, and I am familiar with and accept the obligation of my position as registered and is being filed merely to reflect a change in the registered office address, I
nereby conjum	inci ine c	orporation has been notified in writing of this change.
_ ha	h. Ti	6 DELI7
Sig	nature of Re	istered Agent Date
If signing on be	half of ar	entity:
	;	
T	yped or Print	ed Name
		* * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (03/12)