762746

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Feather Edge Condominium Association, Inc.		
DOCUMENT NUMBER: 762746		
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:		
William E. Beischmann, JR. Esquire Name of Contact Person Garganese Weiss+D'Agresta Firm/Company III N. Orange Ave Suite 2000 Address Orlando TZ 32802 City/State and Zip Code jandrews@orlandolaw. Not Email address: (to be used for future annual report notification)		
g man address. (to be used for fature annual report non-neutron)		
For further information concerning this matter, please call: Janet Galmont at (407 + 497 - 444) Name of Contact Person Area Code & Daytime Telephone Number		
Janet Galmout Name of Contact Person at (407) 497 - 444 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, 617.0502, 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: Feather Edge Condominium Association I
2. The principal office address: 100 Feather Edge LOOP Lake Mary Fz 32746
3. The mailing address (if different):
4. Date of incorporation/qualification: 4-6-82 Document number: 762746
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)
BROWN GARGANESE WEISS + D'Agros # PA = 111 N. Orange Ave. Suite 2000
Orlando Fz 3 32801
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Garganese, Weiss + D'agresta 111 N. Orange Ave Suite 2000 P.O. Hox NOT acceptable Orlando FL 3280
111 N. Orange Ave Suit 2000
Orlando FL 3280
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.
Grenature of an officer or Mirector Janet R. GARMONT, VP 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.
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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