

763945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

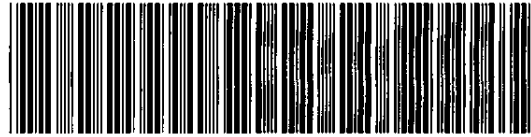
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

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: BRYN MAWR SOUTH HOMEOWNERS ASSOCIATION U

2. The principal office address: 4581 SAINT BRIDES CT.
ORLANDO, FLORIDA 32812

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06/28/1992 Document number: 763945

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)

RESIGNED

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

JENNIFER BECKER

4581 SAINT BRIDES CT.

P.O. Box NOT acceptable

ORLANDO, FLORIDA 32812

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FLORIDA DEPARTMENT OF STATE

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.

John Hess
Signature of an officer or director

JOHN HESS, PRESIDENT HOA
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.

Jennifer Becker
Signature of Registered Agent

10-18-2010
Date

If signing on behalf of an entity:

Jennifer Becker
Typed or Printed Name

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

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRYN MAWR SOUTH HOMEOWNERS ASSOCIATION
Name of Corporation

DOCUMENT NUMBER: 763945

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:

JENNIFER BECKER
Name of Contact Person

BRYN MAWR SOUTH HOMEOWNERS ASSOCIATION
Firm/Company

4581 SAINT BRIDES CT.
Address

ORLANDO, FLORIDA 32812
City/State and Zip Code

brynmawrsouth.hoa@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JENNIFER BECKER at (407) 947-7149
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