

Secretary of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re: Green Arbor Owners' Association, Inc.

Dear Sir/Madam:

In reference to the above-mentioned corporation, enclosed please find a Statement of Change of Registered Office or Registered Agent, or Both, together with our owners' association check in the amount of \$35.00 representing the filing fee.

Thank you for your assistance in this regard. Should you have any questions, please do not hesitate to contact me at (850) 651-8084.

Sincerely,

GREEN ARBOR OWNERS' ASSOCIATION,

Genny Furcell

INC.

By: GINNY PURCELL, Secretary

Enclosures: a/s

FILED

CRETARY OF STATE

LLAHASSEF, FLOOR

R.A. Change

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STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH
To the Secretary of State of the State of Florida.

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes the undersigned corporation, organized under the laws of the State of Florida, Sabmits of Changing its registered office of the state of Florida. registered agent, or both, in the State of Florida. FIRST: The name of the corporation is GREEN ARBOR OWNERS' ASSOCIATION, INC. SECOND: The address of its present registered agent is 305 Main Street, Destin, Florida 32541 THIRD: The address to which its registered agent is to be changed is 99 4th Avenue, #133, Shalinear, FL 32579 FOURTH: The name of its present registered agent is <u>Kathleen Reynolds Et Al</u> FIFTH: The name of its successor registered agent is Virginia G. Purcell SIXTH: The address of its registered office and the address of the business office of its registered agent, as changed, will be identical. SEVENTH: Such change was authorized by resolution duly adopted by its board of directors. Dated Dody , 2001. GREEN ARBOR OWNERS' ASSOCIATION, (exact corporate name) SIGNATURE: resident DATE: Destamber HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES. SIGNATURE: FILING FEE: \$35.00 DIVISION OF CORPORATIONS - PO BOX 6327 - TALLAHASSEE, FL 32314