## 768018

(Requestor's Name)
(Address)
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(Address)
(Address)
·
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dusings Futih Nama)
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
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September 13, 2007

APRIL BROWN ASHVILLE AREA PROPERTY OWNERS' ASSOC 13 EAST 10TH WAY GREENVILLE, FL 32331

SUBJECT: ASHVILLE AREA PROPERTY OWNERS' ASSOCIATION, INC.

Ref. Number: 768018

We have received your document for ASHVILLE AREA PROPERTY OWNERS' ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Letter Number: 907A00054295

Tina Roberts Document Specialist

## **COVER LETTER**

TO: Amendmen Division of	t Section Corporations		
SUBJECT: Ashv	ille Area Property Owners'	Association, Inc.	
DOCUMENT NU	MBER: 768018		
The enclosed Staten	nent of Change of Registered Office/A	gent and fee are submitted for filing.	
Please return all cor	respondence concerning this matter to	the following:	
,	April Brown		
-	(Name of Conta	ct Person)	
<u> </u>	Ashville Area Property Owner	rs' Association, Inc.	
	(Firm/Comp	oany)	
<u>1:</u>	3 East 10th Way		
	(Addres	s)	
G	reenville, FL 32331		
For further informat	(City/State and 2 ion concerning this matter, please call		
April Brown	-		
	ne of Contact Person)	at ( <u>850</u> ) <u>997-7171</u> (Area Code & Daytime Telephone Numb	er)
Enclosed is a \$35.00	check made payable to the Departme	ent of State.	
	Matter A. Derry	CAA A J.J.	
·	Mailing Address: Amendment Section	Street Address: Amendment Section	
	Division of Corporations	Division of Corporations	
	P.O. Box 6327	Clifton Building	
	Tallahassee, FL 32314	Clifton Building 2661 Executive Center Gircle Tallahassee, FL 32301	X
espectf.ll	re-submitted a	HASS	RECEIV
copecinal	re-submitted 9/	mo →	-
	I hank you!	## <del>#</del> #	

CR2E045 (8/05)

## 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, ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.		-	
1. The name of	the corporation: Ashville Area Property Owners' Association , TNC ,			
2. The principal	office address: 13 East 10th Way Greenville, FL 32331			
3. The mailing a	address (if different):			_
4. Date of incor	poration/qualification: April 19, 1983 Document number: 768018			
	d street address of the current registered agent and registered office on file with the rtment of State:			
	Diana K. Shumans			
	3520 Thomasville Road Suite 200			
	Tallahassee, FL 32309	⊋or	0	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	EURETAI LLAHAS	7 SEP 19	٠
	Richard E. Benton	RY O	9 AM	į
	1415 Piedmont Drive Suite 4	FLOI FLOI	흜	•
	(PO. Box NOT acceptable)  Tallahassee, FL 32308	REALE	27	
	ess of its registered office and the street address of the business office of its regist be identical.  as authorized by resolution duly adopted by its board of directors or by an officer be board or the corporation has been notified in writing of the change.		nt,	
admortzed by t	SNEMBO SICTE			
(Signal	ure of an officer or director) (Printed or typed name and title)		-	
I hereby accept I further agree of my duties, ar document is be corporation ha	t 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 per familiar with and accept the obligation of my position as registered agent ing filed merely to reflect a change in the registered office address, I hereby confished in writing of this change.	performan t. Or, if t irm that t	ıce his he	
	estleth 9/7/07		<del>_</del>	
•	Ignature of Registered Agent) (Date)			
ii signing on be	ehalf of an entity:			
	Typed or Printed Name)			

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