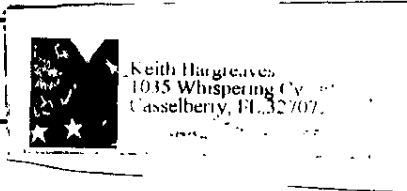


769049



(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

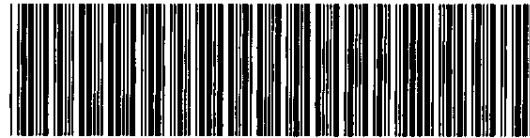
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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AND
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12 JAN 11 PM 12:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BAP
1/11/12
TC

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: CREEKS BEACH HOMEOWNERS ASSOC.
2. The principal office address: 5840 RED BULL LAKE Rd NO. 70
WINTER SPRINGS, FL 32708
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 9/23/1982 Document number: 769049

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: CLAYTON & McCulloh
(FIRED) 1065 MAITLAND CENTER COMMONS BLVD
MAITLAND, FLORIDA 32751

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

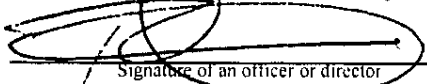
KEITH HARGREAVES
1035 WHISPERING COVE
P.O. Box NOT acceptable
CASSELBERRY, FL 32007

12 JAN 11 PM 12:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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.


Signature of an officer or director

RYAN STRANDQUEST - PRESIDENT
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.

Keith R Hargreaves
Signature of Registered Agent

22 DEC. 2011
Date

If signing on behalf of an entity:

Typed or Printed 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 (8/05)