

L04000053314

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2004 OCT 25 PM 1:09  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN OCT 26 2004

MJC

MICHAEL J. COOPER  
ATTORNEY AT LAW

321 N.W. 3RD AVENUE • OCALA, FLORIDA 34475 • TELEPHONE 352-732-4500 • FAX 352-351-3859 • EMAIL mcooper@michaeljcooper.com

October 21, 2004

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

FILED  
2004 OCT 25 PM 1:09  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

RE: *Reserve at Heathbrook, Limited Liability Company*

Dear Sirs:

Please find enclosed the original and one copy of the Statement of change of Registered Office or Registered Agent or Both for Limited Liability Corporation. Also enclosed is a check for the filing fee of \$25.00.

Please return the copy showing receipt and filing of same. Thank you for your cooperation in this matter.

Sincerely yours,

Michael J. Cooper

MJC/slw

Enclosures

xc: Mr. Jim Claeys

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the limited liability company is: RESERVE AT HEATHBROOK, LLC
2. The mailing address of the limited liability company is : 401 NW 1ST AVENUE, OCALA, FL 34

7/19/04

L04000053314

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

MICHAEL J. COOPER

Name

321 NW THIRD AVENUE

Address

OCALA, FL 34475

City, State and Zip

6. The name and address of the new registered agent and/or office:

JAMES R. CLAEYS

Name

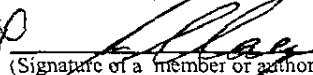
401 NW 1ST AVENUE

Florida street address (P.O. Box **NOT** acceptable)

OCALA FL 34475

City, State and Zip


If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
(Signature of a member or authorized representative of a member)

JAMES R. CLAEYS

(Printed or typed name of signer)

*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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
(Signature of Registered Agent)

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**

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