N0000000 1624

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600345285666

 $08/06/20-01006-016 \quad \bullet \cdot 55.06$

2070 ;**** - 8 PH 3: 01



COVER LETTER

Amendment Section Division of Corporations

e - - 7

TO:

Address

Winter Garden, FL 34787 City/State and Zip Code

SUBJECT: REGAL POINTE HOMEOWNERS' ASSOCIATION, INC.	
Name of Corporation	
DOCUMENT NUMBER: N00000001624	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for	or filing
Please return all correspondence concerning this matter to the following:	
Jan McClanahan	
Name of Contact Person	
Southwest Property Management of Central FL Inc.	
Firm/Company	
13350 W. Colonial Drive Ste 330	

jan@swpmcfl.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Jan McClanahan
 at (407) 656-1081

 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

Amendment Section
Division of Corporations

Street Address:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

in ord	nange is submitted for a corporation organized under the laws of the State of <u>FLC</u> ler to change its registered office or registered agent, or both, in the State of Flor	rida.
1. The name of	the corporation: REGAL POINTE HOMEOWNERS' ASSOCIATION, INC.	
	l office address: Co Southwest Property Management of Central FL Inc.	
13350 W Color	ial Drive Ste 330 Winter Garden, FL 34787	
3. The mailing	address (if different): P. O. Box 783367 Winter Garden, FL 34778	
4. Date of inco	poration/qualification: 02/16/2000 Document number: N0000000162	24
5. The name an	d street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	
	Leland Management, Inc.	
	6972 Lake Gloria Blvd.	' '
	Orlando, FL 32809	ر. دی
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office	: :: ::>
	Southwest Property Management of Central FL Inc.	PP ···································
	13350 W Colonial Drive Ste 330	ي. 20.2
	P.O. Box NOT acceptable Winter Garden, FL 34787	
The street addre	ss of its registered office and the street address of the business office of its regi	istered agent,
	s authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.	er so PRESIDE
Signatur	of an officer or director Col an officer or director Printed or typed name and title	<u> </u>
hereby accept to further agree to further agree to further agree to coment is bein orporation has	he appointment as registered agent and agree to act in this capacity. It comply with the provisions of all statutes relative to the proper and complete I am familiar with and accept the obligation of my position as registered ager If giled merely to reflect a change in the registered office address, I hereby con been notified in writing of this change.	performance it. Or if this firm that the
	<u> </u>	
Sign	Ture of Registered Agent Date	
signing on beh	alf of an entity:	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

CR2E045 (04/13)