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Amendment Section

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Please return all o	orrespondence conce	erning this ma	tter to the following	ng:		
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,	Jeffrey C.	Sweet, E	squire - Atte	ention:	Penny	Every
:		(Name of	Contact Person)	•		•
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	595 We	st Granad	a Blvd., Suti	Le A		
			Company)			-
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• •	Ormond	Beach, F	r -3917/		÷	
	Ormond		and Zip Code)	<u> </u>		-
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or further inform	nation concerning this	c matter islead	se colle			

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organiz	red under the laws of the State of Florida	
in order to change its registered office or registere	ed agent, or both, in the State of Florida.	
1. The name of the corporation: PINE TRAILS-PHASE	III SUBDIVISION HHOMEOWNERS ASSOCIATION, IN	NC.
2. The principal office address: 37 Ocean Pines Dr	rive, Ormond Beach, FL 32174	
3. The mailing address (if different):		
4. Date of incorporation/qualification: 04/18/2000	Document number: <u>N00000002556</u>	
The name and street address of the current registered age Florida Department of State:	ent and registered office on file with the	
Jeffrey C. Swee	t, Esquire	
595 West Granad	a Blvd., Suite A	
Ormond Beach, F	L 32174	•
6. The name and street address of the new registered agent (if changed): Alexis Bairstow 37 Ocean Pines Driv (P.O Box NOT acceptable) Ormond Beach, FL 32	PILED REIARY OF STANSSEE, FLO	3 · · · · · · · · · · · · · · · · · · ·
The street address of its registered office and the street as changed will be identical.	ddress of the business office of its registered agent,	
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been noti	by its board of directors or by an officer so field in writing of the change.	
(Signature of an officer or director)	Alexis Bairstow, President (Printed or typed name and title)	
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statut of my duties, and I am familiar with and accept the oblig document is bring filed merely to reflect a change in the corporation has fleen norfied in writing of this change.	agree to act in this capacity. es relative to the proper and complete performance eation of my position as registered agent. Or, if this registered office address, I hereby confirm that the	
My	9/27/07	
Signature of Registered Agent) Alexis Bairstow If signing on behalf of an entity:	(Date)	
Slax (Typed or Printed Name)	•	
	·	

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (8/05)

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