## N0000005090

(Re	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
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(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
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Special Instructions to	Filing Officer:			

Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations					
SUBJECT: Forest Lakes Preserve Homeowner's Association Inc  Name of Corporation					
DOCUMENT NUMBER:         N0000005090					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Karen Koch					
Name of Contact Person					
Karen Koch Inc					
Firm/Company					
6156 Sabal Point Circle					
Address					
Dort Orongo, El. 20120					
Port Orange, FL 32128  City/State and Zip Code					
<u>kar_koc@msn.com</u> E-mail address: (to be used for future annual report notification)					
E-mail address. (to be used for fature aiman report nonnearon)					
For further information concerning this matter, please call:					
Karen Koch at (386) 767-8282  Name of Contact Person Area Code & Daytime Telephone Number					
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  Street Address: Amendment Section					
Amendment Section Amendment Section  Division of Corporations Division of Corporations					
LINVISION AT LAPPACISHOUS LINVISION OF LAPPACISHONS					

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

## 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: Forest Lakes Preserve Homeowner's Association, Inc.					
2. The principal office address: 6156 Sabal Point Circle, Port Orange, FL 32128					
	· · · · · · · · · · · · · · · · · · ·				
3. The mailing a	address (if different): c/o Karen Koch I	nc, PO Box 291282, Po	ort Orange, FL 32129		
4 Date of incor	poration/qualification:08/03/2000	Document number:	N0000005090		
	d street address of the current registered ag				
	rtment of State: (If resigned, enter resigned				
	Michele Barkin				
	1190 Pelican Bay Drive		S\$ 5 ₹		
	Daytona Beach, FL 32119				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
	Karen Koch		<del></del>		
6156 Sabal Point Circle					
P.O. Box NOT acceptable					
	Port Orange, FL 32128				
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 of the corporation has been notified in writing of the change.					
/ les	ire of an officer or director	Dee Antony,	President		
<del></del> -	the appointment as registered agent and to comply with the provisions of all statu ad I am familiar with and accept the obli ing filed merely to reflect a change in the s been notified in writing of this change.	• •			
14	19_	12-7-0	9		
Sig	nature of Registered Agent	Date			
If signing on behalf of an entity:					
т	yped or Printed Name				
•	J				

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