N0000005123

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(В	usiness Entity Name)
(Di	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to Con who by Huly	Filing Officer: Les de Cunnet process 11-5-12

Office Use Only



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RAKSThy

SECRETARY OF STATE
DIVISION OF CORPORATIONS
OF THE STATE OF THE STATE

T. ROBERTS

COVER LETTER

Division of Corporations
SUBJECT: Fairway Oriens at Surry brook, Inc. Name of Corporation
DOCUMENT NUMBER: N 000000 5/23
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:
Stacia Searcy Scofero Name of Contact Person
Community Association Management by Stacia Fre.
1990 Main St. Suite 750
Sarasota F/34236 City/State and Zip Code
Stacia @ Cam - 55. Com F-mail address (to be used for future annual report potification)

For further information concerning this matter, please call:

Amendment Section

Stacia Scofero at (94/) 3/5-8044
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

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

CR2E045 (03/12)

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: Fairway Greens at Stoney brook, Frc.
2. The principal office address: 1990 Main 5+. Suite 750
Sarasota F1 34236
3. The mailing address (if different): <u>Same as above</u>
· · ·
4. Date of incorporation/qualification: 1/4/2000 Document number: NO00000 5723
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)
Action Association Management, Inc
1282 4th St.
Sarasota, F1 34236
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Community Association by Stacia IN.
1990 Main St. Suite 750
Sarasota F134236
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 appropriate by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director DONALD E. WILLETTS, UKE PRESIDENT
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 beingifiled merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
8.29-12
Signature of Registered Agent Date
If signing on behalf of an entity:
Staga Scotors Typed or Printed Name
* * * CIT INC PPP- 925 00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)