N004a4

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SECRETARY OF STATE
NACLAHASSEE, FLORICA



COVER LETTER .

TO: Amendmer Division of	nt Section Corporations			
SUBJECT: ANDOVER C CONDO ASSOC. INC Name of Corporation				
DOCUMENT NU	MBER:	N00424		
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:				
		· ·		
Douglas Christy Name of Contact Person				
•	Name of Co	ontact Person		
Wetherington, Hamilton, Harrison & Fair, PA Firm/Company				
	riiii/C	ompany		
1010 N. Florida Avenue				
Address				
Tampa, Florida 33602				
Tampa, Florida 33602 City/State and Zip Code				
dgc@whhf-law.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
г	Douglas Christy	813 205 1049 v 20		
	ne of Contact Person	at (813) 225-1918 x 29 Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.				
	Mailing Address:	Street Address:		
	Amendment Section Division of Corporations	Amendment Section Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		
		Tallahassee, FL 32301		

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stange is submitted for a corporation organized under the laws of the State of $\frac{1}{2}$ ler to change its registered office or registered agent, or both, in the State of F	Florida
1. The name of	the corporation: Andover C Condominium Association, Inc)
• •	office address: c/o Sterling Management Services, 1904 Clubho	use Drive
	address (if different):	
4. Date of incorp	rporation/qualification: 12/16/1983 Document number:	N00424
	nd street address of the current registered agent and registered office on file with artment of State: (If resigned, enter resigned)	th the
	James R. DeFurio, Esq.	_
	201 E. Kennedy Blvd., Suite 1460	_
	Tampa, FL 33602	_
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered off	ice .
	Douglas Christy, Esq.	<u>.</u>
	1010 N. Florida Avenue	09 SEI
	P.O. Box NOT acceptable Tampa, FL 33602	FIL DCT-2 DRETAR LAHASS
The street addre	ress of its registered office and the street address of the business office of it I be identical.	s registere degenti
Such change wa authorized by	as authorized by resolution fully adopted by its board of directors or by an the board, or the corporation has been notified in writing of the change.	SHATE SHATE SHATE SHATE
Signatur	Brian L. May	
I hereb y acc ept I further agree to of my duties, an document is bei corporation has	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and con nd I am familiar with and accept the obligation of my position as registere sing filed merely to reflect a change in the registered office address, I hereb as been notified in writing of this change.	aplete performance A agent. Or, if this By confirm that the
Sign	gnature of The stered Agent 9124169	
	ehalf of an entity:	
	Douglas Christy 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 * * *