

1. No 10000002382

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

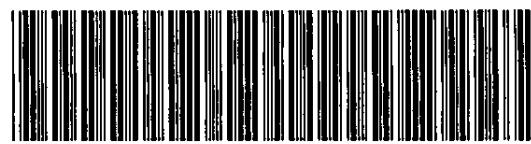
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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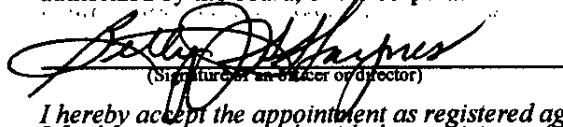
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

*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: Preserve at Astor Farms Homeowners' Association, Inc.
2. The principal office address: 5756 S. Semoran Boulevard, Orlando, Florida 32822
  
3. The mailing address (if different): Same as above.
  
4. Date of incorporation/qualification: 04/02/2001 Document number: N01000002382
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  
  
All About Management, Inc.  
206 S. Elm Avenue  
Sanford, FL 32771
  
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
  
House of Management Enterprises for Community  
Associations, Inc.  
(P.O. Box NOT acceptable)  
5756 S. Semoran Boulevard, Orlando, Florida 32822

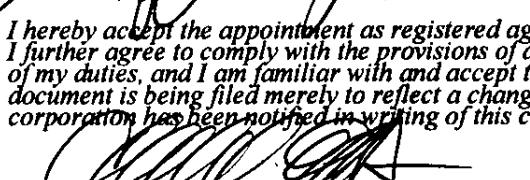
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an Officer or Director)

Betty J. Haynes, President, PAAF HOA, Inc.  
(Printed or typed name and title)

*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 being filed merely to reflect a change in the registered office address, I hereby confirm that the  
corporation has been notified in writing of this change.*

  
(Signature of Registered Agent)

1/7/13  
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)

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