## N01000005108

- SENTRY management <sub>inc.</sub> 2180 State Road 434 W Ste 5000 Longwood FL 32779-5044  43800	
(City/State/Zip/Phone #)	
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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, the undersigned corporation organized under the laws of the State ofSEMINOLE
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Playida
1. The name of the corporation: THE ROSE BAY HOMEOWNERS ASSOCIATION, INC.
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2. The mailing address of the corporation: 2180 W SR 434 STE 5000
LONGWOOD FL 32779
3. Date of incorporation/qualification: 07/17/2001 Document number: N01000005108
4. The name and address of the current registered agent and office:
WALKER, BERRY J JR
235 SOUTH MAITLAND AVE STE 216
MAITLAND FL 32751
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  (P. O. Box Not Acceptable)
JAMES W HART JR
SENTRY MANAGEMENT INC 2180 W SR 434 STE 5000
LONGWOOD FL 32779-5044
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.
10/15/02
(Signature of an officer, chairman or vice chairman of the board) (Pate)
BERKY WALKER
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
A.1 1 = 10/22/04
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
JAMES W HART JR-SENTRY MANAGEMENT INC PRESIDENT
(Typed or Printed Name) - (Capacity)
* * * FILING FEE: \$35.00 * * * =