Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000177976 3)))



H100001779763ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From

Account Name : BRIAN J. WELKE PA

Account Number : I20060000150 Phone : (352)357-0400 Fax Number : (352)357-9950

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE

CLAKE SAUNDERS POINTE HOMEOWNERS ASSOCIATION, INC.

Certificate of Status

Certified Copy

Page Count

Estimated Charge

\$35.00

AUG IO AM II: 28

Electronic Filing Menu

Corporate Filing Menu

Help

8/6/2010

08/10/2010 TUE 16:05 FAX (((H | DOOO 177976 3)))

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: Lake Saunders Privite Homeowners Association Inc.
2. The principal office address: 11013 Lake VIIIa Drive
Tavarro FL 32778
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/05/2001 Document number: N 01000007136
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)
Peter B. Mc Grath Espure
801 N. Magnoha Av. St. 317
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Brian J Welke Esquire 30 7
531 North Bay Street
Eustis FL 32726
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 CHF SEDVE 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 withing of this change.
Sylpractific of Registerious Agents 89/10 Date
If signing on behalf of an entity: Brian J Welke 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

LIC HI0000177976 3)))