N01000007	259	÷	<u> </u>
Requester's Name Centex Homes 385 Daugus Address Address Address City/State/Zin Phone #	l l	40000625083 -07/08/0201063 *****35.00 ****	4 2 008 ∗∗35.00
CORPORATION NAME(S) & DOCU		Office Use Only	r#JJ. UJ
1. Mr. Manrice Shan (Corporation Name)	ns 407-841	-4141	·
(Corporation Name)	(Document #)		
2. (Corporation Name)	(Document#)		e escalid — ve ê
3(Corporation Name)	(Document#)		n neems in in
4(Corporation Name)	(Document#)		
☐ Walk in ☐ Pick up time		Certified Copy	
☐ Mail out ☐ Will wait	Photocopy	Certificate of Status	<u>i.</u>
NEW FILINGS	<u>AMENDMENTS</u>		
Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS	Amendment Resignation of R.A Change of Registe Dissolution/Withd Merger REGISTRATION/QI	rawal 02 JUL SECRETA ALLAHA	
Annual Report Fictitious Name	Foreign Limited Partnershi Reinstatement Trademark Other	OF STATE 7/23/02	/ <i>-</i>
CD2E031(7/07)		Examiner's Initials /	eus

CR2E031(7/97)



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 15, 2002

K. STAPLETON CENTEX HOMES 385 DOULGAS AVE., SUITE 2000 ALTAMONTE SPRINGS, FL 32714

SUBJECT: LAKE LUCY ESTATES HOMEOWNERS ASSOCIATION, INC.

Ref. Number: N01000007259

We have received your document for LAKE LUCY ESTATES HOMEOWNERS ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent designated must be an active Florida corporation or limited liability company or a foreign corporation or limited liability company authorized to transact business in Florida. Please correct the document accordingly.

Please type or print the name of the person signing the document underneath their signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Corporate Specialist Supervisor

Letter Number: 802A00043549

D2 JUL 22 AN 8:53

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 of Florida	
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Lake Lucy Estates Homeowners Association	
Inc.	1 y
	ā
2. The mailing address of the corporation: 11/ N. Orange Ave., Suite 1200	
Orlando, FL 32801	
3. Date of incorporation/qualification: 10/10/200/ Document number: 10/00007259	
4. The name and address of the current registered agent and office:	
Maurice Shams	- 11 -
III N. Orange Ave., Suite 1200	
Orlando FL 32801	
5. The name and address of the new registered agent (if changed) and/or registered office (if changed)	
(P. O. Box Not Acceptable)	
antov Homas - James Makeanskel	į
20~ 0	
THRITION TO SPECIAL STATES	_
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.	-
(Signature of an officer, chairman or vice chairman of the board)	_
(Jake)	
Maurice Shams, Director (Printed or typed name and ritle)	
(Printed or typed name and title)	•
Having been named as registered agent and to accept service of process for the above stated corporation. Thereby 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 daties, and I grafamiliar with and accept the obligation of my position as registered the control of the proper and complete registered the control of the proper and complete registered the control of the property of the control of the property of the control of the property of the control of the control of the property of the control of the	
Chr 7/19/on	
(Bignature of Kegistered Agent) (Date)	
If signing on behalf of an entity:	
James Makransky	
(Typed or Printed Name) (Capacity)	i
* * * FILING FEE: \$35.00 * * *	

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314