N01000008228

(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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Special Instructions to Filing Officer:						





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SECRETARY OF STATE
TALL AHASSEE, FLORE

R.A. Charge C.COULLIETTE

MAY 2 4 2010

EXAMINER

Statement of Change of Registered Office or Registered Agent or Both for

Corporations

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78767

Phone: 800-345-4647 Fax: 800-432-3622

regagent@capitolservices.com

Secretary of State **Division of Corporations** P.O. Box 6327

Tallahassee, FL 32314

DATE: STATE:

5/21/2010 **FLORIDA**

REP UNIT:

THE FLORIDA CENTRAL PARK

PROPERTY OWNER'S ASSOCIATION, INC.

Enclosed for filing please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above referenced name, which is to be filed in your office. Enclosed is check #19338 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Change of Agent Section of the Registered Agent Department.

Should you need to return this document for any reason please send it to:

Capitol Corporate Services, Inc. PO Box 1831 Austin, TX 78767

> Capitol Corporate Services, Inc. Registered Agent Services



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

statement of cha	provisions of sections 607.0502, 617.0 nge is submitted for a corporation org r to change its registered office or regi	anized under	the laws of the State of	FLORIDA	et la de vier	
1. The name of t	he corporation: THE FLORIDA CEN	ITRAL PAR	K PROPERTY OWN	VER'S ASSOCIATION	, INC.	
	office address: 2200 Century Pa			· · · ·		
Atlanta, C	****		,			
3. The mailing a	ddress (if different): 2200 Century	/ Parkway	, Ste. 100			
	GA 30345			 		
4. Date of incorp	poration/qualification: 11/21/200	1 Docu	inent number: N010	000008228		
	street address of the current registered timent of State: (If resigned, enter resig		gistered office on file v	vith the		
	C T Corporation System					
1200 South Pine Island Road						
	Street Address		2222	Se	<u> </u>	
	Plantation	FL				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Capitol Corporate Services, Inc.						
	155 Office Plaza Drive, Suite A					
	Tallahassee	FL	32301		₩	
	City	State	Zip Code	>		
The street addre	ess of its registered office and the stre be identical.	et address of	the business office of	its registered agent,		
Such change wa	ns authorized by resolution duly adop ne board, or the corporation has been	ted by its boa	ard of directors or by a	m officer so		
	Color of the color	Clay	W. Reesc	Secretory File (printed or typed)		
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent to comply with the provisions of all st d I am familiar with and accept the o ny filed merely to reflect a change in Been notified in writing of this chang					
<u>Oll</u>	anu Case		5-21-	10		
If signing on bel	half of an entity:					
Delanie Case	e, Asst. Secretary on behalf					
of Capitol Co	orporate Services, Inc.					

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 * * *

Name (printed or typed)