

N02000001181

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

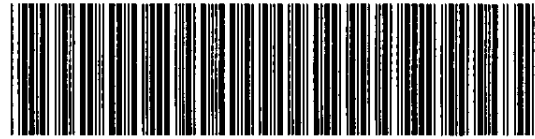
(Business Entity Name)

(Document Number)

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RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUN 18 AM 8:30

RA/RO/CH8
@ 6/18/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Fawn Ridge Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N02000001181

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Heather M. Wells

Name of Contact Person

Anytime Property Management Services, LLC

Firm/Company

PO Box 236967

Address

Cocoa, FL 32923

City/State and Zip Code

info@anytimepropmgt.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heather M. Wells

Name of Contact Person

at (**321**) **298-0785**

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 7, 2012

HEATHER M. WELLS
ANYTIME PROPERTY MANAGEMENT SERVICES LLC
P.O. BOX 236967
COCOA, FL 32933

SUBJECT: FAWN RIDGE HOMEOWNERS ASSOCIATION, INC.
Ref. Number: N02000001181

We have received your document for FAWN RIDGE HOMEOWNERS ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 212A00016142

New attached,

RECEIVED
DIVISION OF CORPORATIONS
2012 JUN 18 AM 9:26
TO AGENCY OF RESTATE

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: Fawn Ridge Homeowners Association, Inc.
2. The principal office address: 134 South Woods Drive, Rockledge, FL 32955
3. The mailing address (if different): PO Box 236967, Cocoa, FL 32923

4. Date of incorporation/qualification: 2/13/2002 Document number: N02000001181

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)

KEVIN DAVIS
Community Management Specialists
1750 W. Broadway Street, Suite 222, Oviedo, FL 32765

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Anytime Property Management Services, LLC
C/O Heather Wells
P.O. Box NOT acceptable
134 South Woods Drive, Rockledge, FL 32955

12 JUN 18 AM 8:30
SECRETARY OF CORPORATION
DIVISION OF CORPORATIONS

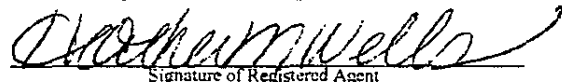
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Eliud Pagan, Vice President
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

6/14/2012

Date

If signing on behalf of an entity:

Heather M. Wells

Typed or Printed Name

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