N02000007214

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	(dress)		
(Cit	ty/State/Zip/Phone	<u> </u>	
PICK-UP	☐ WAIT	MAIL.	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
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TRANSMITTAL LETTER

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TO: Amendment Section Division of Corporations			
SUBJECT: Fairview Estates Villas Homeowners' Association	oп	. , 7	.nc
DOCUMENT NUMBER: N0200007214			
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:			
James M Nolan (Name of person)			-
First Choice Association Management (Name of firm/company)		OK HAY	77
4174 Woodlands Parkway (Address)	£	2	FILED
Palm Harbor FL 34685 (City/state and zip code)	31V () 31E	AM 4: 30	D
For further information concerning this matter, please call:			
Jan Male at (727) 785-8887 (Name of person) (Area code & daytime telephone number)	er)	, - 10 2	·
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 409 E. Gaines Street Tallahassee, FL 32399			

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	
change is submitted for a corporation organized under the laws of the State of rt or t clo in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Fairview Estates Villas Homeowners Association	, ,
2. The principal office address: \$174 Wood lands Parkway	-
tain Harbor F1 34485	
3. The mailing address (if different):	
	-
4. Date of incorporation/qualification: 9 do 02 Document number: NO200007214	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Richard Manley	
124 Anclote Rd	
Tarpon Springs FL 34689 FS =	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
First Choice Association Management	
4174 Woodlands Parkway	
(P.O. Box or personal mailbox NOT acceptable)	
Falm Harbor FL 34685	
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) Richard J Manley (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.	
I Hole Cliston	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
en e	
(Typed or Printed Name) (Capacity)	٠.

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