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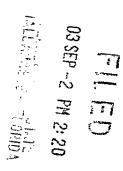
REDECCA FURLOW
10 LE PAL MANDEMENT INC
1633 E. VINE St., Str. 110
(Address) (SSIMMLE SJ744) (City/8tate/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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09/02/03--01043--022 **35.00



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 is: WINDSON POINTE XI
CONDOMINIUM ASSOCIATION, INC.
2. The mailing address of the corporation is: 10036 SAW GRASS De. W #/
PONTE YEDRA BEACH, FL 32082
3. Date of incorporation/qualification: 11-20-32 Document number: NOL 00008993
4. The name and address of the current registered agent and office:
PATRICIA ARENAS
10036 SAWGRASS DR WSUITE!
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Rebecca FURLOW Go LELAND MANAGEMENT INC
· · · · · · · · · · · · · · · · · · ·
1633 E. VINE St Suite 110 = 27 8
KISSIMMEE, FL 34744
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.
fordamin Mill Tit
(Signature of an officer, chairman or vice chairman of the board) (Date)
BENJAMIN P. WALKER IV President
(Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, 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.
Kille Swall Signature of Registered Agent) 8/29/03 (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
A A A THE THEORY WITH BOX AS A A A

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

CR2E045(7/97)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314