## ND2195

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	<b></b> WAIT	MAIL
(Busi	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
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## **COVER LETTER**

Division	of Corpora	ations			
SUBJECT: F	IRST A		HOMEOWN	ERS ASSOCIATION poration)	N, INC.
			•	·	
DOCUMENT N	UMBER:	N0219	95		<u></u>
The enclosed Sta	tement of	Change of Regis	stered Office/	Agent and fee are submitt	ed for filing.
Please return all	correspond	ence concerning	this matter to	the following:	,
	•	•		J	
		Joanne Or	rrick		
			lame of Conta	act Person)	
		First At		Homeowners Ass	ociation, Inc.
	· · · · · · · · · · · · · · · · · · ·		(Firm/Com	pany)	
		708 NE 1s			
			(Addres	SS)	
		Gainesvil (C	le, FL	32601	
	_			-	
For further inform	mation con	cerning this mat	ter, please cal	1:	
Joanne (	Orrick			at ( 352 ) 871	-4595
		ontact Person)	<del></del>	at ( <u>352</u> ) <u>871</u> (Area Code & Daytin	ne Telephone Number)
T 1 1' 00'	- 00 1 1				
Enclosed is a \$35	o.00 check	made payable to	the Departm	ent of State.	
	Ma An	iling Address: nendment Section	on	Street Address: Amendment Sec	rtion
		ision of Corpo		Division of Cor	
		D. Box 6327		Clifton Building	-
	Tal	llahassee, FL 3	2314	2661 Executive	
				Tallahassee, FL	. 32301

TO:

Amendment Section

## 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: FIRST AT SEVENTH HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: 708 NE 1st Street
Gainesville, FL 32601
3. The mailing address (if different):
4. Date of incorporation/qualification: 04/01/1993 Document number: N02195
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Adams, Hawes
2622 NW 43rd Street Ste A3
Gainesville, FL 32606
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Orrick, Joanne
708 NE 1st Street
(P.O. Box NOT acceptable)
Gainesville, FL 32601
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.
Joanne Orrick, President (Signature of an differ or director)  Joanne Orrick, 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.
Mane Carriel 11-10-2005
(Signature of Registered Agent) (Date)  If signing on behalf of an entity:
(Typed or Printed Name)
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)