## N0300001913

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Parker Place Homeowners Association (Name of Corporation)
DOCUMENT NUMBER: N0300001913
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:
Myra Rando Dh (Name of Confact Person)
Community Management Concepts
7400 Bay Meadows Way, Suite 317
Sacksonville, FL 32256 (City/State and Zip Code)
For further information concerning this matter, please call:
Milra Randolph au 904, 367-8532
(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

## 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: Parker Place Home owners Association of Dural
2. The principal office address: 7400 Bay Meadows Way Suite 317 County, Inc.
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 3 64 200 Bocument number: N0300000 1913
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Linda Traylor
9191 R.G. Skinner Parkway Suite 602 8 -
Jacksonville, FL 32256
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):  - Community Management torrepts
7400 Bay Meadows Way Suite 317 of Jacksonvill
JackSonVille, FL 32256
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)  (Printed or typed name and title)
Thereby 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)  (Signature of Registered Agent)  (Date)
If signing on behalf of an entity:
Myra Kardolph
(Typed or Printed Name)

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