

N030000004120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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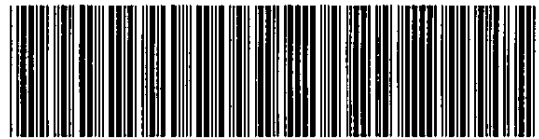
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TB

SEP 10 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Pinehurst at Stratford Place Section I Residents Assoc
Name of Corporation

DOCUMENT NUMBER: N03000004120

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:

Wanda Pearson
Name of Contact Person

Association Consulting & Mgmt Services
Firm/Company

PO Box 111851
Address

Naples, FL 34108
City/State and Zip Code

wanda@managepros.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wanda Pearson at (239) 598-9977
Name of Contact Person 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: Pinehurst at Stratford Place Section I Residents' Association, Inc.
2. The principal office address: c/o Jason Mikes
999 Vanderbilt Beach Road, Suite 501, Naples, FL 34108
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5-15-2003 Document number: N03000004120
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)

Rob Samouce

5405 Park Central Court

Naples, FL 34109

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

Jason Mikes

999 Vanderbilt Beach Road, Suite 501

P.O. Box NOT acceptable

Naples, FL 34108

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TALLAHASSEE, FLORIDA

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

Chad Phipps

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

7/31/09
Date

If signing on behalf of an entity:

JASON HAMILTON MIKES

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
CR2F045 (8-05)