## N03000004791

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
. Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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10/04/07--01011--010 ++35.00

SECRETARY OF STATE

APPROVED AND FILED

C. Coustons OCT 1 0 2007

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: The Oaks of Alva Property Owners Assoc., Inc. (Name of Corporation)				
DOCUMENT	NUMBER: N03000004791			
The enclosed S	Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return a	ll correspondence concerning this matter to the following:			
	e management of the control of the c			
	Maurice B. Gibson (Name of Contact Person)			
	(Name of Contact Lorson)			
	N/A			
	(Firm/Company)			
	19201 Witts End			
	(Address)			
	The second secon			
	Alva, Fl. 33920 (City/State and Zip Code)			
na di Santana di Santa				
For further into	firmation concerning this matter, please call:			
	Maurice B. Gibson at (239) 872-3344 (Name of Contact Person) (Area Code & Daytime Telephone Number			
	(Name of Contact Person) (Area Code & Daytime Telephone Number			

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

statement of cha	inge is submitted for a corporation organized i	under the laws of the State of Fk	orida
1. The name of	the corporation: The Oaks of Alva Property Ov	wners Assoc. Inc.	
•			
3. The mailing a	address (if different): P.O. Box 942, Alva, FL	33920	
4. Date of incorp	ation/qualification: 06/02/2003 Document number: N03000004791  reet address of the current registered agent and registered office on file with the ent of State:  thristopher J. Shields  833 Hendry St.  1. Myers, FL 33901  Reet address of the new registered agent (if changed) and /or registered office o		
	d street address of the current registered agent a treent of State:	and registered office on file with	the
	Christopher J. Shields		
	1833 Hendry St.		
	Ft. Myers, FL 33901		07 OO SECR
6. The name and (if changed):	I street address of the new registered agent (if o	changed) and /or registered office	SSE P
	Maurice B. Gibson		* )
	19201 Witts End		≅≧ _
	and the second s		>
<del>-</del>	ess of its registered office and the street addresses be identical.  as authorized by resolution duly adopted by ine board, or the corporation has been notified.	ts board of directors or by an of in writing of the change.	fficer so
I hereby accept I further agree I further agree of my duties, an document is bei corporation has		ree to act in this capacity. elative to the proper and compl on of my position as registered a istered office address, I hereby (	
(Sig	gnature of Registered Agent)	(Date)	
If signing on be	half of an entity:		
	yped or Printed Name)		

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

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