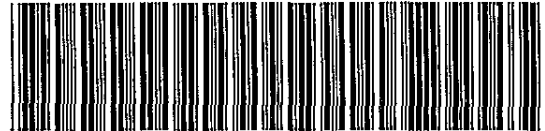


ND3DDDDDD5637

(Requestor's Name)

Luis I. Riera
9346 Whispering Meadows Ln
Orlando, FL 32825



500025124865

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

12/08/03--01049--020 **35.00

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

RA/RO change
12/15/03
1a

FILED
03 DEC -8 PM 1:55
TALLAHASSEE, FLORIDA

ML

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: SEMINOLE PALMS OF LARGO HOMEOWNER ASSOCIATION
2. The principal office address: 1721 RAINBOW DR
CLEARWATER, FL 33755
3. The mailing address (if different): 1721 RAINBOW DR
CLEARWATER, FL 33755
4. Date of incorporation/qualification: 6-27-03 Document number: NO3000005637
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

J. MARCUS VERNON

1721 RAINBOW DR

CLEARWATER, FL 33755

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

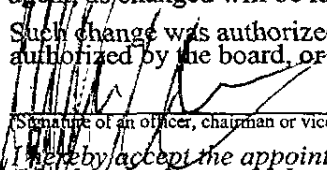
LELAND MANAGEMENT INC.

1633 E. VINE ST. SUITE 110
(P.O. Box or personal mailbox NOT acceptable)

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, or the corporation has been notified in writing of the change.


(Signature of an officer, chairman or vice chairman of the board)

JAMES VERNON, 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.

Rebecca Furlow
(Signature of Registered Agent)

10-22-03
(Date)

If signing on behalf of an entity:

Rebecca Furlow
(Typed or Printed Name)

Agent
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILED
03 DEC -8 PM 1:55
TALLAHASSEE, FLORIDA
FLORIDA DEPARTMENT OF STATE