N03000000448

Leland Management 8009 South Orange Ave Orlando, FL 32809
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·
Office Use Only



700081801537

12/01/06--01017--001 **35.00

OF DEC -1 PM 3: 17

RA Rolchg 12.4.04

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

7.

Pursu int to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of Junior
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation is: Heritage Park Jourses Owner
association Ac.
2. The mailing address of the corporation is: 8009 S. Okano, Que.
Oxlando IL 32809
3. Date of incorporation/qualification: 7-28-03 Document number: 20-03/3550
4. The name and address of the current registered agent and office:
James W. Hart On
Senter Mannent Lan
2/80 W SR 434, Suite 5000
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Bebecca Gurlow
8009 S. Oranne Que
Orlando Il 32809
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 author zed by the board.
11/22/05
(Signature of an officer, chairman or vice chairman of the board) (Date)
•
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation. I hereby accept the appointment as registered agent and agree to act in this capacity. I further laftee 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.
Signature of Registered Agent) (Date)
If signir 3 on behalf of an entity:
Kehecaa Fuelow Agent
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045[7/97)