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SECRETARY OF STATE OF STATE OF CORPORATIONS

RARDONS 101-31-13

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: Westchester of Countryside Neighborhood Association In 2. The principal office address: 2760 Sea Pine Circle East
Ckaruater, Florida 33761 3. The mailing address (if different):
5. The maining address (ii different).
4. Date of incorporation/qualification: 08 19 2003 Document number: NO3000007230
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)
Robert L. Tankel, Esquire Cresigned)
1022 Main Street, Suite D
Dunedin Florida 34698
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Bennett L. Rabin, Esquire Rabin Farker, R.A. 28163 U.S. Highway 19 North Suite 207 Ab. Box Not acceptable
Clearwater, Florida 33761
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, of the comporation has been notified in writing of the change.
Chester G. Ellos Jr., President Signature of an officer or director Chester G. Ellos Jr., President
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 dorporation has been notified in writing of this change.
Signature of Registered Agent Bennett L. Rabin If signing on behalf of an entity:
RABIN PARKER P. A. 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 CR2E045 (03/12)