N03000008363

(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
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COVER LETTER

TO: Amendment Section Division of Corporations

CITRUS SPRINGS VILLAGE "F" HOMEOWNERS ASSOCIATION, INC.

SUBJECT:

Name of Corporation

DOCUMENT NUMBER, NO300008363

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:

DESIREE LINDAHL

Name of Contact Person

SOUNDVIEW PROPERTY MANAGEMENT

Firm/Company

333 17TH STREET, SUITE A

Address

VERO BEACH, FL 32960

City/State and Zip Code

DESIREE@SOUNDVIEWMGT.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DESIREE LINDAHL

,772 234-3005

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

... ___

statement of change is submitted for a corporation organized under the laws of the State of FL	
in order to change its registered office or registered agent, or both, in the State of Flo	
1. The name of the corporation: CITRUS SPRINGS VILLAGE "F" HOMEOWNERS ASSOCIA	TION, INC.
2. The principal office address: C/O SOUNDVIEW PROPERTY MANAGEM	ENT
333 17TH STREET, SUITE A, VERO BEACH, FL 32960	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 9/26/2003 Document number: N03000	008363
5. The name and street address of the current registered agent and registered office on file with Florida Department of State: (If resigned, enter resigned)	the
GOLDEN SANDS COMMUNITY MANAGEMENT	
7150 20TH STREET, SUITE H	
VERO BEACH, FL 32966	
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed):	15 X 0V
SOUNDVIEW PROPERTY MANAGEMENT	V 20
333 17TH STREET, SUITE A	
P.O. Box NOT acceptable VERO BEACH, FL 32960	₹ 5
The street address of its registered office and the street address of the business office of its reas changed will be identical.	egistered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an off authorized by the board, or the corporation has been notified in writing of the change.	icer so
Signature of an officer or director AFF George Bod Printed or typed name and title	ine
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 comple performance of my duties, and I am familiar with and accept the obligation of my position as agent. Or, if this document is being filed merely to reflect a change in the registered office a hereby confirm that the corporation has been notified in writing of this change.	ete s registered uddress, I
One Par 111715	
Signature of Registered Agent Date If signing on behalf of an entity:	
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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