N03817

•			
(Red	questor's Name)		
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(Add	dress)		
(City	//State/Zip/Phon	e #)	
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COVER LETTER

Division of Corporations SUBJECT: Plaza Ridge Condominium Association, Inc. (Name of Corporation) **DOCUMENT NUMBER: N03817** 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: Jennifer Stauff (Name of Contact Person) Bosshardt Realty Services, Inc. (Firm/Company) 25 E. Silver Springs Blvd. (Address) Ocala, FI 34470 (City/State and Zip Code) For further information concerning this matter, please call: Jennifer Stauff at (352) 671-8203 x104 (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

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Amendment Section

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

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida S organized under the laws of the State of _	<u>Florida</u>		
		registered agent, or both, in the State of F	ioriaa.		
	the corporation: Plaza Ridge Cor				
2. The principal	office address: 25 E. Silver Sprii	ngs Blvd., Ocala, Fl 34470			
3. The mailing a	address (if different):				
4. Date of incor	poration/qualification: 6/21/84	Document number: N03817	7		
	d street address of the current registertment of State:	ered agent and registered office on file wi	th the		
	Gabbert, Eugene		_		
	1 Emeral Ct		90 אבני 1817 אבני		
	Ocala, FI 34472		P 06 OCT SECRETA		
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered off	26 PM		
	Jennifer Stauff		STATI STATI		
	25 E. Silver Springs Bl		32 RIDA _		
	(P.O. Box NOT acc	ceptable)	•		
	Ocala, FI 34470		_		
The street addr as changed will	ess of its registered office and the s	street address of the business office of it	ts registered agent,		
Such change w authorized by	as authorized by resolution duly ache board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer so		
	ure of an officer or director)	Rosa Vives/President			
, •	•	ent and agree to act in this capacity. Il statutes relative to the proper and con ne obligation of my position as registere e in the registered office address, I herei nange.	nplete performance d agent. Or, if this by confirm that the		
		10/23/06			
(Si	gnature of Registered Agent)	(Date)			
If signing on be	ehalf of an entity:				
	Typed or Printed Name)				

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

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