## NOHOOOSUS

(Requestor's Name)  (Address)  (Address)  Advanced Management of Southwest	800242303798 Horida Inc.
9031 Town Center Parkux P.O. Box NOT acceptable  Lakewood Ranch, FL 34  (Business Entity Name)	タヴァ 12/05/1201004027 **35.00
Certified Copies Certificates of Status	FILED  12 DEC -5 PH 2: 32  SECRETARY OF STATE TALLAHASSEE, FLORIDA  12 DEC -5 PH 2: 32

Office Use Only

## 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: Harborage on Bjaden River Condominium I Association 2. The principal office address: 9031 Town Center Parkway, Lakewood Ranch, Florida 34202
3. The mailing address (if different):
4. Date of incorporation/qualification: 03 15 04 Document number: NO 400002 lde 5
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)
Resigned
TALL 12
FIL ANASS
6. The name and street address of the new registered agent (if changed) and /or registered officer of (if changed):
Advanced Management of Southwest Florida, 2. 3
9031 Town Center Parkway
Lakewood Ranch, FL 34202
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.
Significant of arrothice of director Royal Peterson
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.
De 7- 10-31-12
Signature of Registered Agent Date
If signing on behalf of an entity:
Douglas C. Wilson 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 \* \* \*