N04000008452

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DIVISION OF CORPORATION

12 JUL 23 AN 9: 50

R.A.

JUL 2 4 2012

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

Newton Corner Condominium Association, Inc.

Name of Corporation

DOCUMENT NUMBER: NO400008452

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:

Paul L. Wean, Esquire

Name of Contact Person

WEAN & MALCHOW, P.A.

Firm/Company

646 E. Colonial Drive

Address

Orlando, FL 32803

City/State and Zip Code

newtoncorner@me.com

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

For further information concerning this matter, please call:

Paul L. Wean, Equire

.,,407 \,\999-7780

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 cha	provisions of sections 607.0502, 617.0502 , 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporat <mark>ion organi</mark> zed under the laws of the State of <u>Florida</u> ir to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of t 2. The principal	the corporation: Newton Corner Condominium Association, Inc. office address: 2295 S. Hiawassee Road, Suite 411, Orlando, FL 32	835	
3. The mailing a	nddress (if different):		
4. Date of incorp	poration/qualification: 08/27/2004 Document number: N0400008452)	
5. The name and	I street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)		
	QUARTER5 LLC		
	2295 S. Hiawassee Road, Suite 411	72	DIVIS
	Orlando, FL 32835		SION
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	12 JUL 23 AM	OF COR
	WEAN & MALCHOW, P.A.		POR
,	646 E. Colonial Drive	8 25 8	ATTO
	PO Box NOT acceptable Orlando, FL 32803		5
The street address changed will	ess of its registered office and the street address of the business office of its registered be identical.	agent	•
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.		
_ Once	Printed officer of director Printed office of director	<u>len</u>	/
I hereby accept I further agree performance of agent. Or, if the hereby confirm Wlant	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete involuties, and I am familiar with and accept the obligation of my position as register is document is being filed merely to reflect a change in the registered office address. I that the corporation has been notified in writing of this change Malchows Discourse Registered Agent Date	ed '	
Sik	mature of Registered Agent Date		
If signing on be	chalf of an entity:		
	as Managing Partner of Wean & Malchow, P.A.		
	yped or Printed Name		
e germanista (j. 1965). Vi	* * * FILING FEE: S35.00 * * * MANG CURCUS BAYABLE TO FLORIDA DEPARTMENT OF STATE		

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