

N04000008800

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6360

From: Account Name : BUSH ROSS, P.A.
Account Number : I19990000150
Phone : (813) 224-9255
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: jclazaro@elite-management.net

BOY ENA - 12840-0

REGISTERED AGENT CHANGE
TAMPA PALMS AREA 3 PARCEL 39 HOMEOWNERS
ASSOCIATION,

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

C.COULLIETTE

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EXAMINER

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10 NOV -5 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 NOV -5 AM 10:58

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: TAMPA PALMS AREA 3 PARCEL 39 HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: 13046 RACETRACK RD. #333
TAMPA, FL. 33626
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 01/13/2004 Document number: N04000008800

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)

SCANNAVINO, INC.
720 BROOKER CREEK BLVD, Suite 206
Oldsmar, FL 34677

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

BUSH ROSS REGISTERED AGENT SERVICES, LLC

1801 N. HIGHLAND AVENUE

P.O. Box NOT acceptable

TAMPA, FLORIDA 33602

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.

Rhonda Mendoza
Signature of an officer or director

Rhonda Mendoza
Printed or typed name and title

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.

[Signature]
Signature of Registered Agent

11/5/10
Date

If signing on behalf of an entity:

Eric N. Appleton, VP of Registered Agent
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

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