N04000009340

| (Requestor's Name) | | | | |
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| PICK-UP WAIT MAIL | | | | |
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| (Business Entity Name) | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: Black Lake Park Homeowners Association, Inc. (Name of corporation) |
| (Name of corporation) |
| DOCUMENT NUMBER: N04000009340 |
| 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: |
| Karen Wonsetter (Name of contact person) |
| Law Office of Karen Wonseller, P.A. (Firm/Company) |
| 860 N. Orange AVL Suite 135 (Address) |
| Orlando FL 32801 (City/state and zip code) |
| For further information concerning this matter, please call: |
| Karen Wansetter, Esq. at (407) 770-0846 (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 409 E. Gaines Street Tallahassee, FL 32399

$\ensuremath{\mathcal{I}}_{\text{\tiny{\sc STATEMENT}}}$ 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 ange is submitted for a corporation organized under the l | aws of the State of Fl | orida | <i>;</i> | |
|--|--|---------------------------------------|---|------------------------------|-----------------|
| | er to change its registered office or registered agent, or b | | rida. | | |
| 1. The name of | the corporation: Black Lake Park Homeowners Associa | tion, Inc. | | | |
| 2. The principal | I office address: 860 N. Orange Ave. Suite 135, Orlando | o, FL 32801 | | | |
| 3. The mailing a | address (if different): | | | | |
| 4. Date of incor | rporation/qualification: 09/30/04 Documen | nt number: N0400000 | 9340 | | |
| 5. The name an | d street address of the current registered agent and register | | | | |
| | Leland Management | | | | |
| | 8009 S. Orange Ave. | | \$\ 12 \$\ 12 \$\ 12 \$\ 12 \$\ 12 \$\ 12 \$\ 13 \$\ 14 \$\ 14 \$\ 16 16 16 16 16 16 16 16 16 16 16 16 16 | 80 | نية. |
| | Orlando, FL 32822 | | URE I | 08 NOV 26 | $\frac{1}{1}$ |
| 6. The name an (if changed): | d street address of the new registered agent (if changed) a | and /or registered offic | ARY OF | 26 AM 10: | THE IN |
| | Karen Wonsetler PA | | 807. ¥IS | <u>.</u> | O |
| | 860 N. Orange Ave. Suite 135 | , | 3.0 7.0 7.0 | • | |
| | (P.O. Box NOT acceptable) | | | | |
| | Orlando, FL 32801 | | | | |
| The street addr | ress of its registered office and the street address of the II be identical. | business office of its | registered | d agen | t, |
| Such change wanthorized by | vas authorized by resolution duly adopted by its board of the board, or the corporation has been notified in writing | of directors or by an o | officer so | | |
| (Signa | ture of An officer or director) | Bonvo 4 Printed or typed name and tit | Pres. | | |
| I hereby accep I further agree of my duties, a document is be corporation ha | of the appointment as registered agent and agree to act to comply with the provisions of all statutes relative to and I am familiar with and accept the obligation of my peing filed merely to reflect a change in the registered of as been notified in writing of this change. | _ | | orman r, if th that th | ce iis ie |
| (S | Signature of Registered Agent) | Nov. 24, 2 | ,000 | | - |
| If signing on b | ehalf of an entity: | | | | |
| Karen | Wonsetter P.A. | | | | |

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