## N05000000351

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(ст., ст. ст. ст.)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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01/12/06--01022--005 \*\*35.00

DIVISION OF CORPORATIONS

RA Chg.

Richard E. Larsen\*†
Ratryk Ozim
Frank A. Ruggieri†
Thomas R. Slaten, Jr.



\* 55 East Pine Street Orlando, Florida 32801 Telephone: 407.841.6555 Facsimile: 407.841.6686

Bec 3 1/6

\* Admitted in Florida and Illinois

† Shareholder

January 4, 2006

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **ATTN: VELMA SHEPARD**

RE: Registered Agent Changes

Dear Ms. Shepard:

Pursuant to our telephone conversation today, please find enclosed the following checks that were inadvertently left out of the mailings sent for Change of Registered Agent on January 3, 2005. The following checks and document numbers represent each of the registered agent changes:

Check No.: 000057 (Condo A): Document Number: N05000000352 Check No.: 000057 (Condo B): Document Number: N05000000354 Check No.: 000057 (Condo C): Document Number: N05000000351 Check No.: 000352 (Master):

Thank you you're your assistance in this matter. If you have any questions regarding this, please feel free to contact me.

Sincerely,

Jenica B. Will, Legal Assistant

/jbw Enclosures

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January 5, 2006

RICHARD E. LARSEN, ESQ. LARSEN & ASSOCIATES, P.A. 55 E. PINE STREET ORLANDO, FL 32801

SUBJECT: SIENA AT CELEBRATION MASTER ASSOCIATION, INC.

Ref. Number: N05000000351

We have received your document for SIENA AT CELEBRATION MASTER ASSOCIATION, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Letter Number: 006A00000735

Thelma Lewis
Document Specialist Supervisor

## 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.	
. The name of the corporation: SIENA AT CELEBRATION MASTER ASSOCIATION, INC.	
2. The principal office address: 745 SIENA PALM DRIVE, CELEBRATION FL 34747	· .
3. The mailing address (if different): 745 SIENA PALM DRIVE, CELEBRATION FL 34747	<u> </u>
4. Date of incorporation/qualification: 01/11/2005 Document number: N0500000351	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
GARY A. POLIAKOFF, ESQ.	
3111 STIRLING ROAD	DIVIS
FORT LAUDERDALE FL 33312	CRE I
5. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	CORPORAT
RICHARD E. LARSEN, ESQ.	20
55 E. PINE STREET	 
(P.O. Box NOT acceptable) ORLANDO, FL 32801	
The street address of its registered office and the street address of the business office of its registered agent is 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.	
Dant Winchard DAVID W PRICHARD Secret (Signature of an officer or director) (Printed or typed name and title)	- 1
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete performance if my dutied, and I am familiar with and accept the obligation of my position as registered agent. Or, if this locument is being filed merely to reflect a change in the registered office address II hereby confirm that the corporation has been dotified in writing of this change.	e is
(Signature of Registered Agent) (Date)	
f signing on behalf of an entity:	
(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 (8/05)

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