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SECRETARY OF STATE DIVISION OF CORPORATIONS

15 5/12/07 A

COVER LETTER

TO: Amendme: Division o	nt Section f Corporations	
SUBJECT:K	EATON BEACH LANDINGS HOMEOWN (Name of Corp.)	
DOCUMENT NU	MBER: N0500000691	
The enclosed State	ment of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all co	orrespondence concerning this matter to	the following:
	WESTON BAUR/ED BAUR MANA (Name of Contact	AGEMENT INC t Person)
	DBA FLORIDA COMMUNITY MA (Firm/Comp	ANAGEMENT any)
-	1731 NW 6TH STREET STE A (Address	
-	GAINESVILLE FL 32609 (City/State and Z	Cip Code)
For further information	ation concerning this matter, please call:	
(Na	WESTON BAUR arme of Contact Person)	at (352_) 22/-1503 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.0	00 check made payable to the Departmen	nt 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 char	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of <u>FLORIDA</u> to change its registered office or registered agent, or both, in the State of Florida.	
	e corporation: Koaten Beach Land ing Stimpuno Association, Inc.	
2. The principal of	office address: 1731 NW 6TH STREET STE A	
•	GAINESVILLE FL 32609	
3. The mailing ac	ldress (if different): PO BOX 14506	
	GAINESVILLE FL 32604	
4. Date of incorp	oration/qualification: 1/12/05 Document number: N05000000691	
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the ment of State:	
	HAUFLER, EUGENE	
	1731 NW 6TH STREET, SUITE A	
	Street address of the new registered agent (if changed) and /or registered office WESTON BAUR /ED BAUR MANAGEMENT, TNO	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): WESTON BAUR/ED BAUR MANAGEMENT INC. DBA FLORIDA COMMUNITY MANAGEMENT 1731 NW 6TH STREET STE.A (P.O. Box NOT acceptable)		
	(P.O. Box NOT acceptable) GAINESVILLE FL 32609	
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.	
Shorda	Rhowda Kunes President (Printed or typed name and title)	
I hereby accept I further agree t of my duties, and document is bein corporation has	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 performance If I am familiar with and accept the obligation of my position as registered agent. Or, if this The filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
Wux Bo	nature of Registered Agent) 8 -21-07 (Date)	
If signing on be	nalf of an entity:	
WESTON /	SAUL yped or Printed Name)	

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