## N05000000925

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(Cit	y/State/Zip/Phone	• #)
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR $\overline{\mathrm{CO}}$ RPORATIONS

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 Floridein order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: The Woods of Lake Helen homeowners Associa
2. The principal office address: 7001 Lake Ellenon Drive, Suite 200
Orlando, FL 32809
3. The mailing address (if different):
4. Date of incorporation/qualification: 1/34/06 Document number: NO500000 925
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Hart, James W. JR. / SENTRY MANAGEMENT INC.
2180 W. SR 434, Suite 5000
LONGWOOD, FL 32779-5044
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed).
Louis P. Shassian
7001 Lake Ellenor Deive, Suite 200
Orlando, FL 32809
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.
Mynthe Same Shannon Barrows (Frinted 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.
Xand Music 4/5/06
(Signature of Registered Agent)  (Vate)
If 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

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

CR2E045 (8/05)