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SECRETARY OF STATE



COVER LETTER

Amendment Section Division of Corporations TO:

SUBJECT: River's Way Homeowners Association, Inc.

(Name of Corporation)

DOCUMENT NUMBER: N05000002013

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filling.

Please return all correspondence concerning this matter to the following:

Daniel W. Hartman

(Name of Contact Person)

Ard, Shirley and Hartman, P.A. (Firm/Company)

207 West Park Avenue, Suite B

Tallahassee, Florida 32301 (City/State and Zip Code)

For further Information concerning this matter, please call:

Daniel W. Hartman (Name of Contact Person) at (850

850 577-6500 (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Muiling Address: Amendment Section Division of Corporations P.O. Box 6327 Tellahassee, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahussec, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida cange is submitted for a corporation organized under the laws of the State of ler to change its registered office or registered agent, or both, in the State of	r Florida
1. The name of	the corporation: River's Way Homeowners Association, Inc.	
	office address: 2290 Delta Blvd., Tallahassee, FL 32303	
3. The mailing a	address (if different):	
4. Date of incor	rporation/qualification: 02/25/2005 Document number: N050	00002013
	nd street address of the current registered agent and registered office on file variment of State:	vith the
	Curtin, Jeanne B. Ard, Shirley & Hartman, P.	<u>A.</u>
	207 West Park Avenue, Suite B	 ,
	Tallahassee, FL 32301	<u> </u>
6. The name an (if changed):		FO SEP SECRET TALLAH
	Daniel W. Hartman	- ASS
	207 West Park Avenue, Suite B (P.O. Box NOT acceptable)	
	Tallahassee, FL 32301	STA.
The street address changed will	lress of its registered office and the street address of the business office of ill be identical.	可谓 いfits registered agent,
Such change wanthorized by	was authorized by resolution duly adopted by its board of directors or by the board, or the composation has been notified in writing of the change.	an officer so
A CONTRACTOR OF THE PARTY OF TH	thing of an obsect of onescent) (Printed or pyped many 2	and times RAY
I hereby accept i further accept of my duties, a document is be corporation he	pt the appointment as registered agent and agree to act in this capacity et the comply with the provisions of all statutes relative to the proper and cand I am familiar with and accept the obligation of my position as registering filed merely to reflect a change in the registered affice address, I he as deen notified in writing of this change.	complete performance red agent. Or, if this reby confirm that the
1 Janu	(Signature of Registered Agent) (Ente)	
Ir signing on b	behalf of an entity:	
	(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
CR2E045 (8/05)