## N650003140

(Requestor's Na	me)
(Address)	
(Address)	" <b>"</b>
(City/State/Zip/F	hone #)
PICK-UP WAI	Γ MAIL
(Business Entity	v Name)
· (Document Number)	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Dak Crossing North Homeowners Asson (Name of corporation)	
DOCUMENT NUMBER: 1005000003140	
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:	
Name of conject person)  Florida Association Management (Firm/Company)	
16. W. Dakin Ave (Address)	
Kissinnee FL 3474/ (City/state and zip code)	
For further information concerning this matter, please call:	
(Name of contact person)  at (407) 483-/30/ (Area code & daytime telephone number)	
(Name of contact person) (Area code & daytime telephone number)	

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

## 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.
1. The name of the corporation: Dak Crossing North Homeowners Assi
2. The principal office address: 16 W. Dakin Ave
Kissimmee, Fl 34741
3. The mailing address (if different):
4. Date of incorporation/qualification: 3135 Document number: NO5000003140
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Florida Association Munagement, DIC
102 Park Place Blvd, SE D-2
Kissimmee, FL 34741
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Florida Association Management Go Dillie Boyd
(P.O. Box NOT acceptable)
Kissimmee, FL 34741
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.
(Signature of an othicer or director) (Printed 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.
dellie tod 7/1/09
f signing on behalf of an entity:
Dillie Bord
(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