## 100500003739

•		
(Requestor's Name)		
(Address)		
(Address)		
(Hadioso)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
(2-3-3-3-3-4-3-4-3-4-3-4-3-4-3-4-3-4-3-4-		
Codifical Coming Codification of October		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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05/14/10--01006--008 \*\*35.00

SECRETARY OF STATE ALLAHASSEE, FLORID





## **COVER LETTER**

Amendment Section Division of Corporations Magnolia at Ocala Homeowners Association, Inc. SUBJECT: Name of Corporation N05000003739 DOCUMENT NUMBER:\_ 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 Contact Person Bosshardt Property Management, Inc. Firm/Company 2123 SW 20th Place Address Ocala, FL 34471 City/State and Zip Code garry@bosshardtrealty.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Garry H. Griffin Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section **Division of Corporations** Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

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

statement of chang	ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida ge is submitted for a corporation organized under the laws of the State of to change its registered office or registered agent, or both, in the State of	Florida
1. The name of the	e corporation: Magnolia at Ocala Homeowners Associ	ation, Inc.
2. The principal of	mice address: GOZ GGGKGGKY (VOITEC, TVITICA T ZKK, T ICHIGA GZ K	
3. The mailing add	lress (if different): Same	
4. Date of incorpo	ration/qualification: 4/12/05 Document number:	N05000003739
	treet address of the current registered agent and registered office on file venent of State: (If resigned, enter resigned)	vith the
<u>.</u>	Kevin Ray	_
8	882 Jackson Avenue, Winter Park, Florida 32789	- 38 o
(if changed):	street address of the new registered agent (if changed) and /or registered of	TALLANASSEE, ELG
<u>[</u>	Bosshardt Property Managment, Inc.	
<u> </u>	2123 SW 20th Place P.O. Box NOT acceptable	
(	Ocala, FL 34471	
The street address as changed will be	s of its registered office and the street address of the business office of e identical.	its registered agent,
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by a board, or the corporation has been notified in writing of the change.	an officer so
Signature	of another or director Printed or typed name and	d title
	he appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and confident in this capacity. I am familiar with and accept the obligation of my position as registe giled merely to reflect a change in the registered office address, I here to the provident in writing of this change.	omplete performance red agent. Or, if this reby confirm that the
Jarry	H- Multiple 5-7-10  Date  Date	, , , , , , , , , , , , , , , , , , , ,
If signing on beh	alf of an entity:	
Тур	* * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314