

N05000004189

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

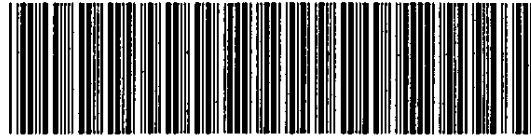
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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July 3, 2007

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

Re: Water Gardens Association, Inc.
Document No. N05000004189

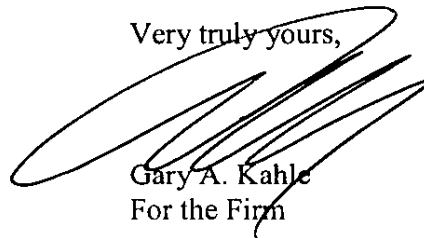
Dear Sir/Madam:

This firm represents Water Gardens Association, Inc. and the registered agent, Vincenzo Lombardi, has asked us to assist him in changing his mailing address with the Division.

Enclosed please find our Cover Letter, Statement of Change reflecting Mr. Lombardi's new address, and a check in the sum of \$35.00 representing your fee in connection with filing the Statement of Change.

As always, should you require any further information or have any questions, please feel free to call us.

Very truly yours,



Gary A. Kahle
For the Firm

GAK:pf
Enclosures
035072.0000.64

EARL D. FARR, 1900 - 1988

EARL DRAYTON FARR, JR.
Senior Counsel

GUY S. EMERICH
FL Bar Board Certified
Wills, Trusts & Estates Lawyer

JACK O. HACKETT II
FL Bar Board Certified
Real Estate Lawyer

MICHAEL P. HAYMANS

CHARLES T. BOYLE
FL Bar Board Certified
Marital & Family Lawyer

DAROL H.M. CARR

CONNIE M. SCHIDER
FL Bar Board Certified
Marital & Family Lawyer
Certified Family Law Mediator

DAVID A. HOLMES
Certified Circuit Court Mediator

GARY A. KAHLE
FL Bar Board Certified
Real Estate Lawyer

JENNIFER R. HOWELL
FL Bar Board Certified
Elder Law Lawyer

ROGER H. MILLER III

DOROTHY L. KORSZEN

JILL C. McCRORY

TINA M. MAYS

WILL W. SUNTER

ANTHONY C. DUBBANEH

ARETI G. TSITSAKIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WATER GARDENS ASSOCIATION, INC.
(Name of Corporation)

DOCUMENT NUMBER: N05000004189

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:

Gary A. Kahle
(Name of Contact Person)

Farr, Farr, Emerich, Hackett & Carr, P.A.
(Firm/Company)

99 Nesbit Street
(Address)

Punta Gorda, Florida 33950
(City/State and Zip Code)

For further information concerning this matter, please call:

Shirley A. Brown at (941) 505-9968
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

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 in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: WATER GARDENS ASSOCIATION, INC.
2. The principal office address: 1625 North Commerce Parkway, Suite 315, Weston, FL 33326
3. The mailing address (if different): _____
4. Date of incorporation/qualification: April 22, 2005 Document number: N05000004189
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

VINCENZO LOMBARDI
3906 LaCosta Island Court
Punta Gorda, Florida 33950

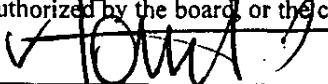
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

VINCENZO LOMBARDI
3322 Purple Martin Drive, Unit 137
(P.O. Box NOT acceptable)
Punta Gorda, Florida 33950

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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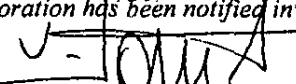
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 officer or director)

VINCENZO LOMBARDI
(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.


(Signature of Registered Agent)

07/02/07
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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