## N050000 4709

(Requestor's Name)					
(Address)					
(Address)					
(Addicas)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
, , , , ,					
(Degument Number)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





600180621946

05/12/10--01016--015 \*\*35.00

SECRETARY OF STATE

APROVE AND YEAR



## **COVER LETTER**

Division of Corporations						
SUBJECT: TYMBER CREEK PLAZA AS		) <u>.                                    </u>				
Name of Corpo	ration					
DOCUMENT NUMBER: N05000	0004709					
The enclosed Statement of Change of Registered Office/Ag	ent and fee are submitte	d for filing.				
Please return all correspondence concerning this matter to the		S				
	Ü					
Russell Bryant						
Name of Contact	Person					
T 1 0 1 D						
Tymber Creek Plaza Association Inc. Firm/Company						
1	,					
444 Seabreeze Blvd. #1000						
Address Commercial States	TAPETHE TACK					
Company of the second	**************************************					
Daytona Beach, Flo City/State and Zi	orida 32118	127 176 2 1 1				
On Journal and En	p Code					
E-mail address: (to be used for future	annual remark notifies	otion)				
E-man address. (to be used for future	amiuai report notifica	uon)				
For South an information and a state of the						
For further information concerning this matter, please call:	•					
Russell Bryant at	(386)	238-3600				
Name of Contact Person	Area Code & Daytime	: Telephone Number				
Enclosed is a \$35.00 check made payable to the Department	of State.					
•						
Mailing Address:	Street Address:					
Amendment Section Division of Corporations	Amendment Section Division of Corporation					
P.O. Box 6327	Clifton Building	Oracions				
Tallahassee, FL 32314	2661 Executive C	Center Circle				
\$6.016.1	Tallahassee FL 3	32301				

TO:

Amendment Section

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

statement of ch	ange is submitted for a co	rporation organize	607.1508, or 617.1508, Flo ed under the laws of the Sta ed agent, or both, in the Sta	<sub>ste of</sub> Florida
			za Association Inc.	V
2. The principa	al office address: 444 Se Beach, Florida 32118	abreeze Blvd.		
3. The mailing	address (if different):			
4. Date of inco	rporation/qualification:	5/5/2005	Document number:	N05000004709
	nd street address of the cur artment of State: (If resign		nt and registered office on f	file with the
	Charles Lichtigmar	1	_	_
	444 Seabreeze Blv	d. #1000		——————————————————————————————————————
	Daytona Beach, FL	. 32118		
6. The name an (if changed):		v registered agent (	if changed) and /or register	ed office
	Joseph R. Daprile			
	59 Deep Woods W	ay	ceptable	
	Ormond Beach, Flo		eceptable	
The street addr as changed wil	ess of its registered office I be identical.	e and the street ad	dress of the business offic	e of its registered agent,
Such change wanthorized by t	as authorized by resoluti the board, or the corporat	on duly adopted b ion has been notif	y its board of directors or led in writing of the chang	by an officer so
Co C Signati	ire of an officer of director	<u> </u>	Charles S. Lichtic	gman, Director
I hereby accept I further agree of my duties, a document is be corporation ha	t the appointment as regi to comply with the provi nd I am familiar with and ing filed merely to reflect s been notified in writing	Stered agent and a sions of all statute I accept the obliga t a change in the r t of this change.	ngree to act in this capacit is relative to the proper an ition of my position as reg egistered office address, I	y. d complete performance istered agent. Or, if this hereby confirm that the
3			4-28-10	
Si	gnature of Registered Agent	<del></del> _	Date	
If signing on be	chalf of an entity:			
JOE 7	DAPRILE Typed of Printed Name			

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