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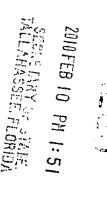
(Requestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: THE RESERVE AT ESTERO HOMEOWNERS ASSOCIATION, INC. Name of Corporation
DOCUMENT NUMBER: Nostocoo 5 224
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:
CLENA FULKER, V. P. Name of Contact Person
CARDINAL MANAGEMENT GROUPS Florida, INC.
3067 TAMIAMI, TRAIL E. Address
Naples, FLORIDA 34113 City/State and Zip Code
G. fulkee 6 Cm GSFL. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CLENT FULKER, V.P. at (239) 774-0723 x 202 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$25.00 check made naughle 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

. TO:

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 <u>FLORIDA</u> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: THE RESERVE AT ESTERO HOMEOWNERS ASSOCIATION, IT
2. The principal office address: CARDINAL MGMT GROUP OF. FLORIDA INC.
5067 TAMIAMI TRAIL E., NAPLES, FLORIDA 34113
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 5-17-05 Document number: NO50000534
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
TOLL FL II LIMITED PARTNERSHIP
28341 South TAMIAMI TRAIL., SUITE4
BONITA SPRINGS, 7L 34134
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): **CARDINAL MEMT GROUP & FLORIDA INC.**
SOGT TAM IAM, TRAIL E P.O. Box NOT acceptable NAPLES 71 34/13
P.O. Box NOT acceptable
NAPIES 71 34/13
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.
Asignature of an officer or director Tim MAN WERS V. P. 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 Date
If signing on behalf of an entity:

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

Typed or Printed Name