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SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

RAchars Thewis 11-9-09

## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: Oak Path Homeowners Association, Inc.  Name of Corporation	
DOCU	UMENT NUMBER: N0500005936	
The er	aclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Jeff Darrey, Jr. Name of Contact Person	
	Firm/Company	
	FIRM/Company	
	15955 North Florida Avenue, Suite 101	
	Address	
	Lutz, FL 33549 City/State and Zip Code	
	jdarrey@gmail.com	
	E-mail address: (to be used for future annual report notification)	
For fu	rther information concerning this matter, please call:	
	Blain Sanford at (813) 931-2551  Name of Contact Person Area Code & Daytime Telephone Num	
	Name of Contact Person Area Code & Daytime Telephone Num	iber
Enclos	sed is a \$35.00 check made payable to the Department of State.	
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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: Oak Path Homeowners Association, Inc.	
2. The principal office address: 15955 North Florida Avenue, Suite 101	
Lutz, FL 33549	
3. The mailing address (if different): n/a	
4. Date of incorporation/qualification: 06-08-2005 Document number: N05000005936	
<ol><li>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)</li></ol>	
LINSKY, DONALD B	
1509B SUN CITY CENTER PLAZA	
SUN CITY CENTER FL 33573 US 全常 量	
SUN CITY CENTER FL 33573 US  6. The name and street address of the new registered agent (if changed) and /or registered officery (if changed):	}
(if changed):  Darrey Jr., Jeff  Darrey Jr., Jeff	
15955 North Florida Avenue, Suite 101  P.O. Box NOT acceptable	
Lutz, FL 33549	
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.	
authorized by the board, of the corporation has been notified in writing of the change.	
Jeff Darrey, Jr., 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.	
Sgnature of Registered Agent Date	
If signing on behalf of an entity:	
Jeff Darrey, Jr. Typed or Printed Name	

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