N0500006193

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(Address)		
(Address)		
,		
(City/State/Zip/Phone #)		
(Sity/States/Eps/ Holle #)		
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Marbella at Davenport Homeon (Name of Control	wners' Association, Inc. proration)
DOCUMENT NUMBER: N05000006193	
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter t	to the following:
Libby Ro (Name of Cont	estuccio act Person)
(Firm/Con	npany)
(* 55.)	
425 W. Colonia (Addre	al Dr., Ste. 204
Orlando (City/State and	, FL 32804 1 Zip Code)
For further information concerning this matter, please ca	11:
Libby Restuccio (Name of Contact Person)	at (407) 650-8134 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departn	ment 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 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 State of F	orida	
1. The name of the corporation: Marbella at Davenport Homeowners' Association, Inc.		
2. The principal office address: 425 W. Colonial Dr., Ste. 204		
Orlando, FL 32804		
3. The mailing address (if different):		
4. Date of incorporation/qualification: <u>June 15, 2005</u> Document number: <u>N050000</u>	006193	
5. The name and street address of the current registered agent and registered office on file with Florida Department of State: (If resigned, enter resigned)	the	
James W. Hart, Jr.		
2180 W. SR 434, Ste. 5000	OB DI SECR	
Longwood, FL 32779-5044	FILET AND HAS	
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed):	AMIO: I	
Jonathan D. Woods, Esq.	PRATE STATE	
425 W. Colonial Dr., Ste. 204	A	
(P.O. Box NOT acceptable)		
Orlando, FL 32804		
The street address of its registered office and the street address of the business office of its as changed will be identical.	registered agent,	
Such change was anthorized by resolution duly adopted by its board of directors or by an cauthorized by the board, or the corporation has been notified in writing of the change.	officer so	
	1)	
(Signature of an other or director)		
I hereby acceptive 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 composition of my duties and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I hereby corporation has been notified in writing of this change.	plete performance agent. Or, if this	
corporation has freeh notified in writing of this change. (Signifure of Registered Agent) If signing on behalf of an entity:	confirm that the	
Typed or Printed Name)		

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