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(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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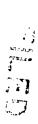


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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: PLAZA AT FIVE POINTS COMMERCIAL CONDOMINIUM ASSOCIATION,	INC.
DOCUMENT NUMBER: NOS 00006200	
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:	
Name of Contact Person	
Firm/Company	
50 CENTRAL AVE. Address	
SARASOTA FZ 34236 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
TOHN J. VETRI JR. at (941) 224-0449  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.
1. The name of the corporation: PLAZA AT FIVE POINTS COMMERCIAL CADOMINIUM  ASSOCIATION, IN
2. The principal office address.
SARASOM FZ 34236
3. The mailing address (if different): -
4. Date of incorporation/qualification: Document number: NOS0000630 C
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)
PROGRESSIVE COMMUNITY MANAGEMENT, INC.
1801 GLENGARY STREET, FL. 1
SARASOTA FL 34231-3637 FR =
SARASOTA FL 34231-3637  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JOHN J. VETRIJR
SO CENTRAL AVE.  P.O. Box NOT acceptable  SARASOTA. FL. 34236
P.O. Box NOT acceptable
- 3 4 236
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.
Rough Reserved Printed or typed name and tille
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.
JOHN J-VETK! JR 12/16/09. Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name  * * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314