N0500000 6675

(Red	questor's Name)			
(Add	dress)			
(Add	dress)	- · · ·		
(City	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
į				

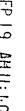
Office Use Only



800334315398

na/19/19--0.008--002 →•35.00

2019 SEP 19 AH 11:40



C. GOLDEN OCT - 5 2019

COVER LETTER

TO: Amendment Section Division of Corporations CRESTWOOD HEIGHTS TOWNHOMES OWNERS ASSOCIATION, INC. SUBJECT: Name of Corporation N05000006675 DOCUMENT NUMBER: 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: Brenda Rozanc Name of Contact Person One Source Management Solutions, Inc. Firm/Company 7400 Sugar Bend Drive Orlando, FL 32819 City/State and Zip Code Brenda@onesmsolutions.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 407 358.6696 x 702
Area Code & Daytime Telephone Number Brenda Rozanc

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

statement of cha	provisions of sections 607.0502, 617.0502, 6 ange is submitted for a corporation organized or to change its registered office or registered	d under the laws of the S	tate of Florida	_
	the corporation: CRESTWOOD HEIGHTS	-	-	ON, INC.
2. The principal	office address: 1600 WEST COLO	NIAL DRIVE		
4. Date of incorp	poration/qualification: 06/24/2005	Document number:	N0500000667	5
	d street address of the current registered agen timent of State: (If resigned, enter resigned)	at and registered office of	n file with the	
	HANSON, JACK			
	1600 WEST COLONIAL DRI	VE) -
	ORLANDO, FL 32804			
6. The name and (if changed):	f street address of the new registered agent (i	f changed) and /or regist		7.
	One Source Management So	olutions, Inc	——————————————————————————————————————	
	7400 Sugar Bend Drive			
	P,O. Box NOT acco	piable		
	ess of its registered office and the street add be identical.			ent,
Such change wa authorized by th	es authorized by resolution duly adopted by ne board, or the corporation has been notified	its board of directors or ed in writing of the chan	by an officer so ge.	9 ~
(X ==	re of an officer or director	SHERH L. J. Printed or typed nai	ENNER . PRE	∌1)eN1
I further agree performance of agent. Or. if th	the appointment as registered agent and agency to comply with the provisions of all statutes my duties, and I am familiar with and accests document is being filed merely to reflect that the corporation has been notified in w	relative to the proper a pt the obligation of my p a change in the regisler	ind complete	
		8/28/2019		_
	nature of Registered Agent	Date		
•	half of an entity:			
Brenda Ro	DZANC yped or Printed Name			

Make checks payable to Florida Department of State Mail, to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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