N05000007553

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
	WAIT	
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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RAGOCH

ECRETARY OF STATE LLAHASSEE, FLORIDA

FILED

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, the undersigned corporation organized under the laws of the State of	
submits the following statement in order to change its registered office or registered agent, or both, in the	
Charles of Ellerida	•
1. The name of the corporation: LOTUS VISTA CONDOMINIUM ASSUCIATION, I	1
2. The mailing address of the corporation: 5955 T. G. Lee Blvd Suite 300	
DRLANDO, FL 32822-4457	
3. Date of incorporation/qualification: 7-22-05 Document number: N-0500007553	
4. The name and address of the current registered agent and registered office:	
ELLEN R WOMBER	
225 S. West MONTE Dr SUITE 3310 3	
5. The name and address of the new registered agent (if changed) and /or registered office (if changed):	
5. The name and address of the new registered agent (if changed) and /or registered office (if changed):	1
Rebecca Furhow To 3	_
5955 T. G. Lee BLVd SuitE 300	
ORLANDO FL 32822- 4457	
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 thange was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.	
(/k/10/14/10/09	
(Signature of an officer, chairman or vice chairman of the board) (Date)	
1) Dudley BATES, FRESIDENT	
(Frinted br typed name and title)	
Having been named as registered agent and to accept service of process for the above stated corporation, 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.	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
Robecca Furhow Agent	
(Typed or Printed Name) (Capacity)	

CR2E045(8/99)

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