105000008977

(Requ	uestor's Name)	
(Addı	ess)	
(Addı	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doce	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



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T. LEMIEU)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

OWNERS Association, INC.

Registration Section

Division of Corporations

TO:

INHS23 (08/05)

Dear Sir or Madam:	
The enclosed Statement of Change of Register fee(s) are submitted for filing.	ered Agent/Registered Office for Alien Business Organization and
Please return all correspondence concerning	this matter to the following:
MARC Bellagiant	
Watson Kealty Cor (Firm/Company)	p Association Management
1410 Palm Copst 4 (Address)	Parkway NW
Parm Const FL 3 (City/State and Zip Code)	32137
For further information concerning this matte	er, please call:
Marc Bellapianta, at ((Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amou	nt:
\$35.00 Filing Fee	□\$43.75 Filing Fee & Certified Copy
7019	

STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

, 1.20,2,2,122 00110
PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE AND/OR REGISTERED AGENT:
1. Pain Industrial Park Owners Association, INC. (Name of alien business organization)
2. <u>CE/31 / QUO5</u> 3. <u>NO5000008977</u> 4. <u>203598318</u> (Florida registration date) (Florida document number) (FEI Number, if applicable)
5. 400 NINTH Street / CO MCNEIL SIGNS, BUNDELL, FL
(Principal office address)
6. Name and address of registered agent and office currently on record with this office:
Hagler Palm Coast Property Management INC.
50 LEANNI Way, SUITE BG
Palm Const, FL 32139
7. New registered agent and/or office address: Watson Realty Corp, Association Management 1410 Palm Coast Parkway, NW
Palm Coast, FL 32137 (Note: Registered office must be a Florida street address)
(Note: Registered office must be a Florida street address)
8. The street address of the registered office and the street address of the business office of the registered agent are identical.
9. Such change was authorized by the board of directors or an officer of the corporation so
authorized by the board of directors.
10. (Signature of chairman, vice chairman, or officer)
AS 1
11. Gwendo Vn Catterty VP (Name and capacity of person signing in number 10 above) ART 5
12. Signature of new registered agent, if applicable:
I hereby accept the appointment as registered agent. I am familiar with and accept the
obligations of section 607.0505, Florida Statutes.

FILING FEE: \$35.00

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

(Registered agent accepting appointment)