N05000009456

(Requestor's Name)						
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PICK-UP WAIT MAIL						
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(Business Entity Name)						
(Document Number)						
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SECRETARY OF STATE

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January 24, 2008

BONNIE STALEY 2855 KINGSLEY DR LAKELAND, FL 33812

SUBJECT: KINSLEY COURT PROPERTY OWNERS' ASSOCIATION, INC.

Ref. Number: N05000009456

We have received your document for KINSLEY COURT PROPERTY OWNERS' ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 308A00005193

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.05				tes, this	
1	nge is submitted for a corpor to change its registered offi	_			la	
		_		-		
1. The name of th	ne corporation: KINSLE	1 COULT 1.	covery auxie	xs Xesou	ATTOM .	The
2. The principal of	office address:	BOX 10	70+ 1		855 KILSU	y DK
H161	MAND CITY F	- 3	3846-1201	LA	Keens, F	<u> 238</u> ,
. 7/.	ddress (if different): P	0 BOX 1 3384	120/			
4. Date of incorpo	oration/qualification:		_ Document number:			
5. The name and Florida Departs	street address of the current ment of State:	registered agent	and registered office	on file with the		
:	FLORIDA MA	HU16 MOUT	4580C		8	
• • •	3361 WEST	- Vice	57 Su	re 208	FEB CRE:	77
· -	Kissimm EE,	R 34	1741		IARY I	
6. The name and (if changed):	street address of the new reg	gistered agent (if	changed) and for regine		OF STATE FLORIDA	D
:	2855 K	insicoy	BR.			
	(P,O Box)	NOT acceptable)	73012	<u> </u>	•	
-	CARCE MUI)	R	338/2			
The street addres as changed will b	ss of its registered office an be identical.	d the street add	ress of the business o	ffice of its reg	istered agent,	
- '	s authorized by resolution of board, or the corporation					
(Signature	e of an officer or director)		Printed or type	d name and title)		
I hereby accept to I further agree to of my duties, and document is bein corporation has i	he appointment as register o comply with the provision I I am familiar with and acc g filed merely to reflect a c been notified in writing of i	ed agent and ag s of all statutes cept the obligate hange in the re this change.	ree to act in this cape relative to the proper ion of my position as gistered office addres	acity. r and complete registered age ss, I hereby co	e performance ent. Or, if this nfirm that the	;
(Down	na talin		1-20-08	_		
(Sign	nature of Registered Agent		(Dai	ie)		
If signing on beh	alf of an entity:					
Bours	ped or Printed Name)					
; (1)	ped of Frince (Maille)					

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

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