NO5000011896

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
·				

Office Use Only



000095874860

04/09/07--01028--019 **35.00

SECRETARY OF STATE

APPROVEL AND FILED

RA. Change

COVER LETTER

SUBJECT: The Grand at Olde Carrollwood Condominium Association, Inc. (Name of Corporation) DOCUMENT NUMBER: N05000011896 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: Jack Piniella (Name of Contact Person) n/a (Firm/Company) 10386 Carrollwood Lane, Unit 271 (Address) Tampa, Fl 33618 (City/State and Zip Code) For further information concerning this matter, please call: Jack Piniella (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute, inge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Florida.	э		
	the corporation: The Grand at Olde Carrollwood Condominium Association, Inc.			
	office address: 10311 Club Circle, Tampa, FL 33618			
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 11/22/05 Document number: N0500001189	6		
	I street address of the current registered agent and registered office on file with the truent of State:			
	Corporation Service Company			
	1201 Hays Street			
	Tallahassee, FL 32301-2525	IA IA	0	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office	SECRETARY OF STALE ALLAHASSEE, FLORIO	07 APR -9	<u>i</u>
	Meirose and Frisca, P.A.	Y OF		(E)
	500 N. Westshore Blvd., Suite 830	2021 7108 7108	9:2	
	(P.O. Box NOT acceptable) Tampa, FL 33609		85	
The street address changed will	ess of its registered office and the street address of the business office of its regis be identical.	stered ag	ent,	
	as authorized by resolution duly adopted by its board of directors or by an office he board or the corporation has been notified in writing of the change.	r so		
Lan	Harully Jack Piniella			
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete and I am familiar with and accept the obligation of my position as registered agent in gliled merely to reflect a change in the registered office address, I hereby constitution of my position as second to the proper and complete and I am familiar with and accept the obligation of my position as registered agent in gliled merely to reflect a change in the registered office address, I hereby constitution of this change.	performa it. Or, if firm that	ance this the	
	gnature of Registered Agent) (Date)		_	
FRANCIS E	Chalf of an entity: FRISCIA FOR WEIROSE -FRISCIA PA Typed or Printed Name)			

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