N05000012033

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne) ,
(Do	cument Number)	;
Certified Copies	_ Certificates	of Status _ :
Special Instructions to	Filing Officer:	***************************************
, ,		

Office Use Only



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09/08/09--01006--020 **35.00



Pachang 09-15-09 Dc

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Sternon Plaza Condominium Association, Inc.						
	Name of C	orporation				
DOCUMENT NUM	UMENT NUMBER: N05000012033					
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:						
		-				
Marshall S. Cohn						
	Name of Contact Person					
Dunhill Management Corporation						
Firm/Company						
520 N Semoran Blvd. Ste 222						
	Add	ress				
_	Orlando, i	L 32807				
City/State and Zip Code						
	msc@du					
E-	-mail address: (to be used for f	uture annual report notificat	ion)			
For further information	on concerning this matter, please of	eall:				
	of Contact Person	at (<u>407</u>) Area Code & Daytime 1	992-4000 Felephone Number			
ramo	or contact reison	raica code & Daytime	relephone rumber			
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 Corpo	rations			
	P.O. Box 6327	Clifton Building				
	Tallahassee, FL 32314	2661 Executive Co				
		Tallahassee, FL 32	2301			

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.15 ange is submitted for a corporation organized unde er to change its registered office or registered agen	er the laws of the State of F	lorida
	the corporation: Sternon Plaza Condom office address: 520 N. Semoran Blvd. Ste 2		Inc.
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 11/29/2005 Do	cument number: NO	05000012033
	d street address of the current registered agent and retreent of State: (If resigned, enter resigned)	registered office on file with	the
	Nadine Brown (Resigned)		
	1073 Willa Springs Drive Suite 2053		
	Winter Springs, FL 32707		
6. The name and (if changed):	d street address of the new registered agent (if char	nged) and /or registered offic	SEP-8
	Dunhill Management Corporation		
	520 N. Semoran Blvd. Ste 222 P.O. Box NOT acceptable		S 50 5
	Orlando, FL 32807		
The street addre	ess of its registered office and the street address of be identical.	of the business office of its	registered agent,
	as authorized by resolution duly adopted by its been notified in		
I Line 1	re of an officer or director	Nadine Brown, Pres	
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to to comply with the provisions of all statutes related I am familiar with and accept the obligation of ing filed merely to reflect a change in the registers been notified in writing of this change.	to act in this capacity. tive to the proper and comp of my position as registered red office address, I hereby	olete performance agent. Or, if this confirm that the
\mathcal{M}	T. LOL	August 31, 2009	9
	chalf of an entity:	Date	
	Marshall S. Cohn 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 (8/05)

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