

NO6000000794

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000116561 3)))



H080001165613ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : TAYLOR WOODROW COMMUNITIES
Account Number : I20000000218
Phone : ~~(727)563-9882~~
Fax Number : ~~(727)563-9674~~

→ Taylor Nonna
813-227-425
813-227-42

2008 APR 30 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

REGISTERED AGENT CHANGE

MAGNOLIA BAY CLUB MASTER ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

DR
4/30/08

RECEIVED
2008 APR 30 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

FAX: H08000116561 3

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Magnolia Bay Club Master Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N06000000794

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:

Rita Jane Iacino
(Name of Contact Person)

Taylor Morrison
(Firm/Company)

4905 West Laurel Street, Suite 100
(Address)

Tampa, FL 33607
(City/State and Zip Code)

→ NOTE: NEW FAX NUMBER:
813-227-4252 ←

For further information concerning this matter, please call:

Rita Jane Iacino at (813) 227-4254
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State. ← Paid via SUBIZ acct / Fax file

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FAX: H08000 1165613

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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Magnolia Bay Club Master Association, Inc.
- 2. The principal office address: 8430 Enterprise Circle, Bradenton, FL 34202-4108
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 01/25/06 Document number: N06000000794
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

S. Todd Merrill
877 Executive Center Drive W., Suite 205
St. Petersburg, FL 33702-2472

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

S. Todd Merrill
4905 West Laurel Street, Suite 100
(P.O. Box NOT acceptable)
Tampa, FL 33607

FILED
 2008 APR 30 PM 1:51
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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 change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



(Signature of an officer or director)

Louis E. Steffens, Vice President

(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



(Signature of Registered Agent)

04/30/08

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
 CR2E045 (8/05)