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(Requestor's Name)	-	
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(Business Entity Name)	II	Alle V
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COVER LETTER

Division of Corporations
SUBJECT: LAKE DAVIS HEIGHTS CONDO ASSOCIATION
DOCUMENT NUMBER: NO600001033
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:
MI CHA EL HILL Name of Contact Person
LAKE DAVIS HEIGHTS CONDO ASSOCIATION
UNIT # 2, 1303 EAST GORE ST Address
ORLANDO FL 32806 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MICHAEL HILL at (904) 497 2170 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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

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

•	isions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this is submitted for a corporation organized under the laws of the State of <u>FLORIDA</u>
	1 Control of the Cont
1. The name of the o	comporation: LAKE DAVIS HEIGHTS EURODO ASSOCIATION INC
2. The principal offi	ce address: 812 NORTH THORNTON AVE
	ORIANDO FL 328
3. The mailing addre	ess (if different):
4. Date of incorpora	tion/qualification: 1/26/06 Document number: NO6 00000 1033
	eet address of the current registered agent and registered office on file with the nt of State: (If resigned, enter resigned)
	KEVIN CHIPPINDALE (RESIGNED)
_	812 NORTH THORNTON AVE
	ORLANDO FL 32803
	eet address of the new registered agent (if changed) and /or registered office
	MICHAEL HILL
	WIT # 2, 1303 EAST GORE ST
	ORLANDO FL 32806 P.O. Box NOT acceptable
	P.O. Box NOT acceptable
The street address of as changed will be	of its registered office and the street address of the business office of its registered agent, identical.
	uthorized by resolution duly adopted by its board of directors or by an officer so oard, or the corporation has been notified in writing of the change.
	Assidele KEVIN CHAPINDATE PRESIDENT an officer or director Printed or typed name and title
I hereby accept the I further agree to c of my duties, and I document is being to corporation has be	appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete performance am familiar with and accept the obligation of my position as registered agent. Or, if this filed merely to reflect a change in the registered office address, I hereby confirm that the en notified in writing of this change.
Signatur	e of Registered Agent Date
If signing on behalf	of an entity:
MICHAEL	4/11

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

Typed or Printed Name