N0600003034

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COVER LETTER

TO: Amendment Section
Division of Corporations

(Name of Corporation)
DOCUMENT NUMBER: N06000003034
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:
Robert L. Taylor, Esq. (Name of Contact Person)
(Name of Contact Ferson)
Taylor & Carls, P.A. (Firm/Company)
150 N. Westmonte Drive (Address)
·
Altamonte Springs, FL 32714 (City/State and Zip Code)
For further information concerning this matter, please call:
Robert L. Taylor, Esq. at (407) 660-1040 (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

. . . .

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stage is submitted for a corporation organized under the laws of the State of \overline{F} r to change its registered office or registered agent, or both, in the State of Fla	<u>lorida</u>			
1. The name of	he corporation: Crescent Place at Lake Lotus Condominium Ass	ociati	on, In	Ç	
2. The principal	office address: 838 GRAND REGENCY POINT, ALTAMONTE S	PRIN	GS, F	L 32714	
3. The mailing a	ddress (if different):	•			
4. Date of incorp	poration/qualification: 03/16/2006 Document number: N06000	00303	34		
	street address of the current registered agent and registered office on file with tment of State: (If resigned, enter resigned)	the			
•	Taylor & Carls, P.A.				
	850 Concourse Parkway, S, Suite 105	4			
	Maitland, FL 32751	SEC	9		
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	RETARY NHÀSSE	JAN 26	Charles Company	
	Taylor & Carls, P.A.	F 0F	A	m	
	150 N. Westmonte Drive (P.O. Box NOT acceptable)	lidu" IVIS	: <u>0</u> 5	0	
	Altamonte Springs, FL 32714	577			
The street address changed will	ess of its registered office and the street address of the business office of its be identical.	registe	ered ag	gent,	
Uncolo 1	as authorized by resolution duly adopted by its board of directors or by an one board or the corporation has been notified in writing of the change. The property of an other or director) The property of an other or directory (Printed or typed name and titled)	0.55.1	so Con	nmunity 1	Manage
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and comp d I am familiar with and accept the obligation of my position as registered ng filed merely to reflect a change in the registered office address, I hereby been portsed in writing of this change.	olete pe agent. v confii	erform Or, ij rm thai	ance f this t the	
· M	nature of Registered Agent) (Date)				
Kobert 1	half of an entity:				
	* * * 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)