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COVER LETTER

Amendment Section Division of Corporations

TO:

English Williams Howers would be accept	an laa	
SUBJECT: Endicott Village Homeowners' Association (Name of Corporation)	on, Inc.	
DOCUMENT NUMBER: N06000004768		
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.	
Please return all correspondence concerning this matter to the fo	ollowing:	
Rachel Sansom		
(Name of Contact Per	son)	
·		
Richard S. Johnson, P.A.		
(Firm/Company)		
36008 Emerald Coast Parkway, Suite 3	301	
(Address)		
Destin, FL 32541		
(City/State and Zip Co	ode)	
For further information concerning this matter, please call:		
Rachel Sansom at (8	50 650-9200 rea Code & Daytime Telephone Number)	
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Department of	State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
<u>•</u>	•	
rananassee, FL 32314		
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	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 ch	ange is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of Florida tered agent, or both, in the State of Florida.
	the corporation: Endicott Village Homeo	
	l office address: 109 Mulry Drive, Nicevil	
3. The mailing	address (if different): 109 Mulry Drive, N	liceville, FL 32578
4. Date of incor	poration/qualification: May 2, 2006	Document number: N06000004768
	d street address of the current registered artment of State:	agent and registered office on file with the
	Richard S. Johnson, P.A.	17 c. 9
	36008 Emerald Coast Parkwa	y, Suite 301
	Destin, FL 32541	27 P
6. The name an (if changed):	Darlane Landsberger 4400 Highway 20 East, Suite 3 (P.O. Box NOT acceptable)	STATE A STATE
The street addr	Niceville, FL 32578 ress of its registered office and the stree	t address of the business office of its registered agent,
•	•	ed by its board of directors or by an officer so otified in writing of the change.
Miller	ture of an other of furctor	Michael R. Flort (PRES.)
I hereby accep I further agree of my duties, a document is be corporation ha	t the appointment as registered agent a to comply with the provisions of all sta nd I am familiar with and accept the ob ing filed merely to reflect a change in t is been notified in writing of this chang	nd agree to act in this capacity. tutes relative to the proper and complete performance ligation of my position as registered agent. Or, if this he registered office address, I hereby confirm that the e.
Mell (Tum	4-16-07
DARCANO If signing on b	endure of Registered Agent) CHWIS BENEZIE ehalf of an entity:	(Date)
((Typed or Printed Name) * * * FILING F	EE: \$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)