## N0600005953

(Re	equestor's Name)	
(Ac	ddress)	·
(Ac	idress)	<u> </u>
(Ci	ty/State/Zip/Phone #)	
•		_
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	•
Certified Copies	Certificates of	Status
	Filler Office	
Special Instructions to	Filing Oπicer:	

Office Use Only



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06/22/12--01007--020 \*\*35.00

JUN 2.3 2012 T. ROBERTS

## **COVER LETTER**

TO: Amendment Section Division of Corporations Vista Del Lago Phase 1 Homeowners Association, Inc. Name of Corporation DOCUMENT NUMBER: N0600005953 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: Michael Laster Name of Contact Person World of Homes Firm/Company 2884 S. Osceola Avenue Orlando, FL 32806 City/State and Zip Code michael@worldofhomes.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 407 770-1748 x 208
Area Code & Daytime Telephone Number Michael Laster Name of Contact Person

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

-	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida
in orde	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Vista Del Lago Phase 1 Homeowners Association, Inc.
2. The principal	office address: 1407 Bella Vista Ct
	FL 33838
3. The mailing a	address (if different): P.O. Box 1838
	e, FL 33838
4. Date of incorp	poration/qualification: 06/01/2006 Document number: N06000005953
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Samuel Pennant
	1407 Bella Vista CT
	Dundee, FL 33838
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	World of Homes
	2884 S. Osceola Avenue
	P.O. Box NOT acceptable
	Orlando, FL 32806
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signatu	are of an officer or director Printed or typed name and title
I further agree to performance of agent. Or, if this	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
_/d/	21 Luc 6/14/2012
	thalf of an entity:
Victoria Dia	·
	yped or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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