## ND6000006205

(Req	uestor's Name)	
(Add	ress)	
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(Add	ress)	
(City,	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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SECRETARY OF STATE DIVISION OF CORPORATION



## **COVER LETTER**

TO:	Amendment Section Division of Corpora	tions		
SUBJE	CCT: Emerson Pa	rk at Ave Maria N Nameof	Jeighborhood Ass	ociation, Inc.
DOCU	MENT NUMBER:_	NO.	6000006205	
The end	closed Statement of C	Change of Registered Off	ice/Agent and fee are su	ibmitted for filing.
Please	return all corresponde	ence concerning this matt	er to the following:	
	·			
		Donna	McDonald ontact Person	
		Name of C	ontact Person	
		Canital Realt	v Advisors Inc	
		Firm/0	y Advisors, Inc. Company	<del></del>
			Drive, Suite 109	
		Ac	dress	
		Palm Roach G	ardone El 33403	
		City/State	ardens, FL 33403 and Zip Code	
		lmoore@canitalr	ealtyadvisors.com	
	E-mail a	iddress: (to be used for		notification)
For furt	ther information cond	erning this matter, please	call:	
	Christin	ne Luce	. 561	624 5000
	Name of Cor		Area Code & I	624-5888 Daytime Telephone Number
Enclose	ed is a \$35.00 check i	nade payable to the Depa	artment of State.	
	Am Div P.C	endment Section ision of Corporations Box 6327	Clifton Bu	nt Section of Corporations
	ı aı	lahassee, FL 32314	ZUULEXCU	ative Conter Choic

Tallahassee, FL 32301

CR2E045 (8/05)

## 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 unge is submitted for a corporation organized under the laws of the State of Florida	
	er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: Emerson Park at Ave Maria Neighborhood Association, In	IC
2. The principal	office address: c/o Capital Realty Advisors, Inc., 600 Sandtree Drive, Suite 109	
	Palm Beach Gardens, FL 33403	_
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 6/8/2006 Document number: N06000006205	_
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	Stackhouse, Edwin D, c/o Pulte Home Corporation	
	9240 Estero Park Commons Blvd	
	Estero, FL 33928	
6. The name and (if changed):	Estero, FL 33928  Estero, FL 33928  I street address of the new registered agent (if changed) and /or registered office	
	Donna McDonald, c/o Capital Realty Advisors, Inc.  By RPOR STATE  600 Sandtree Drive, Suite 109	
	P.O. Box NOT acceptable	
	Palm Beach Gardens, FL 33403	
The street addre as changed will	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 be board, or the corporation has been notified in writing of the change.	
Signatur	Scorr Bizoolcs - President Frinted or typed name and title	
I hereby accept I further agree to if my duties, an document is bei corporation has	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 performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.	
Sonna	mature of Registered Agent 10/21/09 Date	
If signing on be	chalf of an entity:	
DONNA	MCDONALD  'yped 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)