

N 060000012274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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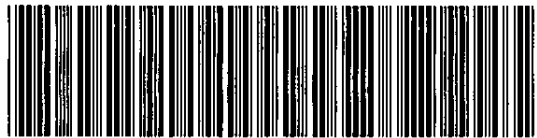
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

T. Roberts NOV 11 2009

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Savannah Trace Residents' Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N06000012274

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:

Donna McDonald  
Name of Contact Person

Capital Realty Advisors, Inc.  
Firm/Company

600 Sandtree Drive, Suite 109  
Address

Palm Beach Gardens, FL 33403  
City/State and Zip Code

lmoore@capitalrealtyadvisors.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christine Luce at ( 561 ) 624-5888  
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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Savannah Trace Residents' Association, Inc.
2. The principal office address: c/o Capital Realty Advisors, Inc., 600 Sandtree Drive, Suite 109  
Palm Beach Gardens, FL 33403
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 11/29/2006 Document number: N06000012274
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

c/o Integrated Property Mgmt.

3435 10th Street N. #201

Naples, FL 34103

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Donna McDonald, c/o Capital Realty Advisors, Inc.

600 Sandtree Drive, Suite 109

P.O. Box NOT acceptable

Palm Beach Gardens, FL 33403

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DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Scott Brooks, President  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

10/21/09  
Date

If signing on behalf of an entity:

DONNA MCDONALD  
Typed 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)