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COVER LETTER

то:	Amendmer Division of	nt Section f Corporations						
SUBJ	ECT:	Fountain Lake Mas	ster Association	tion, Inc.	<u></u>			
DOC	UMENT NU	MBER:N	060000124	59				
The e	nclosed State	ment of Change of Registered O	Office/Agent and	fee are submitte	d for filing.			
Please	e return all co	rrespondence concerning this m	atter to the follow	ving:				
		Kevin Name of	T. Wells, Esq. Contact Person					
	The Law Offices of Kevin T. Wells, P.A.							
		FIII	n/Company					
		22 S. Links	Avenue, Suite	301				
			Address					
	Sarasota, Florida 34236 City/State and Zip Code							
	_	E-mail address: (to be used f	for future annua	l report notific	ation)			
For fu	arther informa	ation concerning this matter, plea	ase call:					
	Ke	evin T. Wells, Esq.	at (94	.1	366-9191			
		ne of Contact Person	Area	Code & Daytim	366-9191 e Telephone Number			
Enclo	sed is a \$35.0	00 check made payable to the De	epartment of Stat	e.				
		Mailing Address: Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	s D C 20	reet Address: mendment Sectivision of Corplifton Building 661 Executive allahassee, FL	oorations Center Circle			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a co	orporation organized	507.1508, or 617.1508, Flo d under the laws of the Sta d agent, or both, in the Sta	nte of Flori	da	_
			ter Association, In		7	
_	nddress (if different): c/d 2, Sarasota, Florida		Management, 4370 S	S. Tamiam	ni Trail,	
4. Date of incorp	poration/qualification:	12/05/2006	Document number:	N060	000124	59
5. The name and		rrent registered agen	nt and registered office on	file with the	;	
	Casey Condomini	um Mgmt		<u> </u>		
	4370 S. Tamiami	Trail, Suite 102				,
	Sarasota, Florida	34231			S 20	
6. The name and (if changed):			if changed) and /or register	red office ASS	2009 NAY 15	
	Kevin T. Wells, Es	sq.			유 구	
	22 S. Links Avenu	e, Suite 301 P.O. Box NOT ac	centable	\bigs_	PH 4: 02 OF STATE	
	Sarasota, Florida		copuloto	3	> ~	
The street addre	ess of its registered offile be identical.	ce and the street ad-	dress of the business offic	ce of its reg	sistered ag	ent,
Such change we authorized by the	as authorized by resoluthe board, or the corpora	tion duly adopted b ttion has been notif	y its board of directors or led in writing of the chan	by an offic ge.	cer so	
	re of anyofficer or director		Richard D. Car		ctor	_
I hereby accept I further agree of my duties an document is bei	the appointment as res	visions of all statute nd accept the obliga ct a change in the r	agree to act in this capaci is relative to the proper a tion of my position as rej egistered office address,	itv	e perform ent. Or ij infirm thai	ance this the
K	= 1/hl	<u> </u>	5/13/2	2009		
	nature of Registered Agent		Date			
If signing on be	ehalf of an entity:					
	evin T. Wells, Esq.					

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