## N06000012768

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



300243439203

01/11/13--01020--021 \*\*105.00

13 JAN 11 PH 1: 14

oor him

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	Name of Corporation
DOCUMENT NUMB	BER: N06000012768
	nt of Change of Registered Office/Agent and fee are submitted for filing.
Please return all corres	spondence concerning this matter to the following:
TI	MOTHY J. BRADLEY
	Name of Contact Person
В	RADLEY & MOREAU
_	Firm/Company
13	318 CAMELLIA BOULEVARD
	Address
L	AFAYETTE, LA 70508

HERITAGE AT TEMPLE TERRACE CONDOMINIUM ASSOCIATION, INC.

tim@realtitle.net

E-mail address: (to be used for future annual report notification)

City/State and Zip Code

For further information concerning this matter, please call:

Timothy J. Bradley

Name of Contact Person

at (337) 235-4660

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
	nge is submitted for a corporation organized under the laws of the State of Florida  r to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: HERITAGE AT TEMPLE TERRACE CONDOMINIUM ASSOCIATION, INC.
1. The name of t	the corporation:
	office address: 10605 N 56 ST
	TERRACE, FL 33617
	ddress (if different): 2851 JOHNSTON ST. PMB 550
LAFAY	ETTE, LA 70503
4. Date of incorp	poration/qualification: 12/14/06 Document number: N06000012768
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	8609 POSTWOOD CIRCLE
	TAMPA, FL 33614
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	ROBERT GRIFFITHS
	5217 81ST ST. N. #10
	ST. PETERSBURG, FL 33709
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	is 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.
Miller	RICHARD PAUL BEAULLIEU  Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if the hereby confirm	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.  OI -9-L3
Č	half of an entity:
ROBE	PATE OF ATT ENTRY:  Sped or Printed Name

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