## N0700001000

• (Requesto	r's Name)
(Address)	
(Address)	
(City/State	/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documen	t Number)
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## **COVER LETTER**

Division of Corporations	
The Village AT Whisperwood Cond SUBJECT:	ominium Dwners Association, Inc
(Name of Corporati	on)
DOCUMENT NUMBER: NO 7 00000/00	. 0
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:
PAUL C PALMER JR (Name of Contact Pe	
(Name of Contact Pe	rson)
-/o PALMER Ito (Firm/Company)	mes, Inc
(Firm/Company)	
620 N. Wymere Rd. (Address)	, Suite 250
(Address)	
MAITLAND, FL 3 (City/State and Zip C	2751
(City/State and Zip C	Code)
For further information concerning this matter, please call:	
PAUL C PAIMEN IR  (Name of Contact Person)  at (	407 657-9200
(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

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## 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	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Candoninium Owners Association, INC	
2. The principal office address: 620 N. Wy More Rd., Suite 250	
MAITLAND, EL 32751	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 1/24/07 Document number: NO 7 000001000	<u>,                                    </u>
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
John D. Ruffier &	
Tohn D. Ruffier  Clo Lowndes Drosdick Doster Kantor + Reserved  450 5. Orange Ave., Suite 800  Orlando, FL 32801	
450 5. Orange Ave., Suite 800	
orlando, FL 32801	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
PAUL C. PAIMER JR.  C/O PALMER HOMES, INC	
c/o PALMER HOMES, INC	
620 N. Wymore Road, Suite 250	
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.	
John B. PAlmer, President (Signature of an officer or director)  (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.	
Paul : 1 Imap. 4/22/08	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
Prul C PAlmer JR.	
(Typed or Printed Name)	

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