NO7000001475

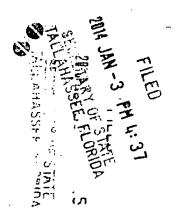
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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(Business Entity Name)				
(Document Number) Certified Copies Certificates of Status				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

GERTLER AND ALE DIVISION OF CORPURATIONS TALLAHASSEE, FLORIDA

December 6, 2013

Robert J. Melehan Forest Oaks Estates Homeowners Assoc P.O. Box 4387 St. Augustine, FL 32085

SUBJECT: FOREST OAKS ESTATES HOMEOWNERS' ASSOCIATION, INC.

Ref. Number: N07000001475

We have received your document for FOREST OAKS ESTATES HOMEOWNERS' ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 213A00027799

COVER LETTER

TO: Amendment Section Division of Corporations

Foerest Oakes Estates Homeowners Association, Inc.

Name of Corporation

DOCUMENT NUMBER: NO700001475

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:

Robert J. Melehan

Name of Contact Person

Forest Oaks Estates Homeowners Association, Inc.

Firm/Company

POB 4387

Address

St. Augustine, Fl 32085

City/State and Zip Code

rimelehan@aol.com

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

For further information concerning this matter, please call:

Robert J. Melehan

.904 \566

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

statement of cha	provisions of sections 607.0502, 617.0502 mge is submitted for a corporation organization of the provision of the section of	zed under the laws of the State of <u>F</u>	lorida	
	r to change its registered office or register Forest Oaks Estate			
	the corporation: Forest Oaks Estate	5 Homeowners Associati	Ori, iric.	
	office address: 815 SR 206 East			
St. Augus	stine, Fl. 32086	 		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 02/07/2007	Document number: N0700	0001475	
5. The name and Florida Depar	t street address of the current registered ag tment of State: (If resigned, enter resigned	ent and registered office on file win	th the	
	John R. Ruggeri	TALL	2014	
	815 SR 206 East	AHA	JA P	
	St. Augustine, Fl. 32086	SSEE.	FLED	
6. The name and street address of the new registered agent (if changed) and /or registered of tice (if changed):				
	Robert J. Melehan	· A.		
POB 4387 5208 DRURY LA.				
	P.O. Boy NOT acceptable			
	St. Augustine, Fl. 32085 3208	94		
The street address changed will	ess of its registered office and the street a be identical.	ddress of the business office of its	registered agent,	
Such change was authorized by th	as authorized by resolution duly adopted la for the corporation has been noti	by its board of directors or by an offied in writing of the change.	fficer so	
VIII		John R. Ruggeri		
/	re of an officer or director	Printed or typed name and title	,	
I further agree i performance of	the appointment as registered agent and to comply with the provisions of all statut my duties, and I am familiar with and ac is document is being filed merely to reflec that the corporation has been notified in	es relative to the proper and com cept the obligation of my position	as registered	
KMeles	han	11/21/2013		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
Robert J. M	lelehan yped or Printed Name			

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