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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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: The Point Townhomes at Little Harbor Homeow Association
2. The principal office address: 611 Destiny Brive Ruskin, FL 33570
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/9/87 Document number: NO700002528
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)
GY Corporate Services, Inc.
777 5. Flagler Drive, Suite 500 Fait
West rum seach, the sixtor
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
2055 Wood Street, Suite 120
Savasota, FL 34237
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 drily adorted by its board of directors or by an officer so authorized by the board, or the contraction has been notified in writing of the change.
Signature of an officer or director KOBERT NEWHART SECR/TREAS Printed or typed haine 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 notification writing of this change.
1-27-10 Signature of Registered Agent Date
If signing on behalf of an entity.
Telese B. McKay Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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