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N07000005869

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(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

Dove Estates Homeowners Assoc, Inc ine SUBJEC

DOCUMENT NUMBER: N & 700000 5869

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:

FRAN CUSON (Name of Contact Person) Pine Dore Estates Homeowners Assoc, Inc. PD box 15887 (Address) Tallahrissee Fl. 32317 (City/State and Zip Code)

For further information concerning this matter, please call:

Fran Colson at (850) 656-5475 (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

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 Horida, in order to change its registered office or registered agent, or both, in the State of Florida.

	1. The name of the corporation: Ane Dore Estates Homenuners Association, Inc.
•	2. The principal office address: 7733 Lone sine Dove Lane
	Tallafrissee Fl. 32311
	3. The mailing address (if different): PO Box 15887
	Ta llabassee Fl. 32317
	4. Date of incorporation/qualification: 6/13/2007 Document number: ND7000005869
	5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
	James R Guerino
	2858 Remington Green Cir
	6. The name and street address of the new registered agent (if changed) and (or registered offer a
	6. The name and street address of the new registered agent (if changed) and /or registered of the new registered agent (if changed):
	Jame R Guerino
	(P.O. Box NOT acceptable)
	Tallahassee Fl. 32311
	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.
	- Danny Me Clellan, di/ector (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.
4	(Signature of Registered Agent)
	If signing on behalf of an entity:
	(Typed or Printed Name)
	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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