## 2180 W State Road 434 Ste 5000 Longwood FL 32779-5044 11055 (Mauros) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_ Special Instructions to Filing Officer:

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12/15/08--01028--006 \*\*35.00

## 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 Statute statement of change is submitted for a corporation organized under the laws of the State of FLOR in order to change its registered office or registered agent, or both, in the State of Florida	RIDA		
1. The name of the corporation: THE ISIS CONDOMINIUM ASSOCIATION, INC.			
2. The principal office address: 2180 W SR 434 STE 5000			
LONGWOOD FL 32779-5044			
3. The mailing address (if different):			
4. Date of incorporation/qualification: 12/20/2007 Document number: N0700001212	:8		
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:			
CHRISTENSEN, C. JOHN ESQ.			
2500 MAITLAND CENTER PARKWAY SUITE 209	TAL!	2008	
MAITLAND FL 32751	CRET	2008 DEC 15	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	RETARY OF A	IS PH	
JAMES W HART JR	RESTA	<del></del> 3	ľ
C/O SENTRY MANAGEMENT, INC./ 2180 W SR 434 STE 5000	Dmi ≯	37	
(P.O. Box NOT acceptable) LONGWOOD FL 32779-5044			
The street address of its registered office and the street address of the business office of its regi as changed will be identical.	stered	agent,	
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change.	_		
(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 of my duties, and I am familiar with and accept the obligation of my position as registered age document is being filed merely to reflect a change in the registered office address, I hereby corcorporation has been notified in writing of this change.	perfor nt. Or, afirm th	mance if this at the	
(Signature of Registered Agent) (Pate)		<del></del> )	
If signing on behalf of an entity:			
JAMES W HART JR (Typed or Printed Name)			
* * * FILING FEE: \$35.00 * * *			