N09715

(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
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SECRETARY OF STATE
ALLAHASSEE, FLORID

PA Change 6-8-07 De

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: The Villages of Seaport Condominium Association, Inc.	
(Name of Corporation)	
DOCUMENT NUMBER: N09715	
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:	
Lauren Bailey	
(Name of Contact Person)	
Clatyon & McCulloh	
(Firm/Company)	
1065 Maitland Center Commons Blvd.	
(Address)	
Maitland Center Commons Blvd., Maitland, FL 32751 (City/State and Zip Code)	
For further information concerning this matter, please call:	
ror rather information concerning this matter, please can.	
Lauren Bailey at (407) 875-2655 (Name of Contact Person) (Area Code & Daytime)	ext. 101
(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 Street Address: Amendment Section	n
Division of Corporations Division of Corpor	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: The Villages of Seaport Condominium Association, Inc.
2. The principal	office address: 8850 North Atlantic Avenue, Cape Canaveral, FL 32920
3. The mailing a	address (if different): 120 N. Seaport Blvd., Cape Canaveral, FL 32920
4. Date of incor	poration/qualification: 6/12/85 Document number: N09715
	d street address of the current registered agent and registered office on file with the rtment of State:
	Becker & Poliakoff, P.A. c/o C John Christensen, Esq.
	2500 Maitland Center Pkwy, #209
	Maitland, FL 32751
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Russell E. Klemm, Esq.
	1065 Maitland Center Commons Blvd.
	(P.O. Box NOT acceptable)
	Maitland, FL 32751
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Lome	John C Olive President Tohn C Olive President (Printed or typed name and title)
harabu accent	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance all fam familiar with and accept the obligation of my position as registered agent. Or, if this in the proper in the registered office address, I hereby confirm that the speen position in writing of this change.
tul	Preduce of Registered Agent) (Date)
•	shalf 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 CR2E045 (8/05)