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SECRETARY OF STATE

APPROVES AND FILED



COVER LETTER

TO:	Amendme Division o	nt Section f Corporations						
SUBJ	ECT: C	ITRUS PARK PLACE HO	OMEOWNERS' ASSOCIATION, I	NC.				
DOC	UMENT NU	MBER: N10	000000071					
The er	nclosed State	ment of Change of Registered Offi	ce/Agent and fee are submitted for filing.					
Please	return all co	prrespondence concerning this matter	er to the following:					
	LISA KELLEY							
		Name of C	ontact Person					
	SENTRY MANAGEMENT, INC.							
		Firm/C	Company					
			dress					
		Au	uiess					
		LONGWOO	DD, FL 32779 and Zip Code					
		City/State	and Zip Code					
	_	INFORMATION@S	SENTRYMGT.COM					
		E-mail address: (to be used for	future annual report notification)					
For fu	rther inform	ation concerning this matter, please	call:					
		LISA KELLEY	at (407) 788-6700 Area Code & Daytime Telephone Nur					
-	Na	me of Contact Person	Area Code & Daytime Telephone Nur	nber				
Enclo	sed is a \$35.0	00 check made payable to the Depa	rtment 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, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of FLORIDA or to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of t	the corporation: CITRUS PARK PLACE HOMEOWNERS ASSOCI	4OITA	1. INC	٥.
	office address: 2180 WEST S.R. 434 SUITE 5000			- •
2. The principal	LONGWOOD, FL 32779			
3. The mailing a	ddress (if different): SAME AS PRINCIPAL			
4. Date of incorp	poration/qualification: 01/04/2010 Document number: N10000000	071		
	street address of the current registered agent and registered office on file with the thrent of State: (If resigned, enter resigned)			
	CORPDIRECT AGENTS, INC.			
	515 EAST PARK AVENUE			
	TALLAHASSEE FL 32301 US			
6. The name and (if changed):	i street address of the new registered agent (if changed) and /or registered office			
	JAMES W. HART, JR.			
	SENTRY MANAGEMENT INC/2180 W. S.R. 434 SUITE 5000	•		
	P.O. Box NOT acceptable LONGWOOD, FL 32779			
The street address changed will	ess of its registered office and the street address of the business office of its registered be identical.	agent,	•	
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.			
Signatu	re of an officer or director Printed or typed name and title			
I hereby accept I further agree of my duties, an document is bei corporation has	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 perfor I I am familiar with and accept the obligation of my position as registered agent. Or, ing filed merely to reflect a change in the registered office address, I hereby confirm th s been notified in writing of this change.	mance if this at the		
4	3/18/10	SEC	101	
98	mature of Registered Agent Pate		MAR	
If signing on be	shalf of an entity:	TARY ASSE	24	= 3
т	yand or Printed Name	THO THE	X	5

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 * * *