**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160002475703)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number Phone

: FCA000000023 : (850)205-8842

Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	.=

## REGISTERED AGENT CHANGE MAPLE GLEN HOMEOWNERS ASSOCIATION, INC.

Certificate of Status	0
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OCT - 6 2016

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## **COVER LETTER**

WID HE CO.	APLE GLEN HOMEOWNERS ASSOCIATION	
		ON, INC.
SUBJECT:	Name of Cor	poration
DOCUMENT	N14000000436 NUMBER:	•
The enclosed S	tatement of Change of Registered Office/	Agent and fee are submitted for filing.
	Il correspondence concerning this matter	
	JENNIFER HARROFF	
	Name of Cont	act Person
	CIRACONNECT	
	Firm/Con	npany
	P.O. BOX 803555	
	Addre	SS
	DALLAS, TX 75380-3555	
	City/State and	Zip Code
	REGISTEREDAGENT@CIRAMAIL.CO	М
	E-mail address: (to be used for fur	ture annual report notification)
For further info	ormation concerning this matter, please or	
JENNIFER HA	RROFF	972 380-3564 at ( )
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$	35.00 check made payable to the Departm	nent 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

CR2E045 (03/12)

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

statement of ch	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of FLORIDA registered agent, or both, in the State of Florida.	
		MEOWNERS ASSOCIATION, INC.	
2. The principal	l office address: 5844 Old Pasco Rd,	100, Wesley Chapel, FL 33544	
3. The mailing	address (if different):	1	
4. Date of incor	rporation/qualification: 01/15/2014	Document number: N14000000436	
	d street address of the current regist rtment of State: (If resigned, enter r	tered agent and registered office on file with the resigned)	
	Rizzetta & Co., Inc.		
	5844 Old Pasco Road, Suite 100		
	Wesley Chapel, FL 33544		!
6. The name an (if changed):		ed agent (if changed) and /or registered office	; ; •
	C T Corporation System		ii -
	1200 South Pine Island Road		
	P.O. B Plantation, Florida 33324	lox NOT acceptable	
		street address of the business office of its registered agen	n it,
Such change wanthorized by t	as authorized by resolution duly a the board, of the corporation has be	donted by its board of directors or by an officer so sen notified in writing of the change.	
Kim	Janux Basely	KIM BAGGETT, SECRETARY  Printed or typed name and title	
1	t the appointment as registered ag to comply with the provisions of a to comply with the provisions of a the deciment is being filed merely that the corporation has been not	ent and agree to act in this capacity, ill statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I tifted in writing of this change.	
	rporation System	10/3/2016	
	grature of Registered Agent	Date .	
•	ehalf of an entity:		
	ASSISTANT SECRETARY 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 (03/12)