Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H15000211812 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (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 PARK PLACE OF MANATEE COUNTY HOMEOWNERS' ASSOCIATION

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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SEP - 3 2015

Help

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COVER LETTER

TO: Amendment Section Division of Corporations	
Park Place Of Manatee County Homeowners' Association, Inc.	
SUBJECT: Name of Corporation	-
N15000002713	_
DOCUMENT NUMBER:	_
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:	
Jennifer Harroff	
Name of Contact Person	
CiraConnect	
Firm/Company	-
P.O. Box 803555	
Address	_
Dallas, TX 75380	
City/State and Zip Code	-
RegisteredAgent@ciramail.com	
E-mail address: (to be used for future annual report notification	5
For further information concerning this matter, please call:	-
Jennifer Harтoff 972 380-3522	
Name of Contact Person at () Area Code & Daytime Tele	phone Number
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address: Amendment Section Division of Corporations Street Address: Amendment Section Division of Corporations	ons

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

CR2E045 (03/12)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	nge is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Statutes ganized under the laws of the State of Florida		_	
	2 0 ,	gistered agent, or both, in the State of Florida.	,		
1. The name of t	he corporation:	County Homeowners' Association, Inc.			
2. The principal	office address: 12602 TELECOM DRI				
3. The mailing a					
4. Date of incom	oration/qualification; 03/16/2015	Document number: N15000002713			
	street address of the current register timent of State: (If resigned, enter res	ed agent and registered office on file with the igned)			
	D. R. HORTON, INC.		tavā.		
	12602 TELECOM DRIVE SUITE 10	0 TAMPA, FL 33637		15 SI	
				-2 -2	i,
6. The name and street address of the new registered agent (if changed) and /or (if changed):		agent (if changed) and /or registered office		P	: 7
	C T Corporation System			ယ္ ?	₹
	c/o C T Corporation System, 1200 Sou		A their	ð	
	PO Box Plantation, Florida 33324	NOT acceptable			
	Plantation, Florida 33324				
The street address changed will	ess of its registered office and the str be identical.	reet address of the business office of its regis	tered ag	ent.	
Such change was authorized by the	is authorized by resolution duly ado board, or the corporation has been	pted by its board of directors or by an officer n notified in writing of the change.	' SO		
1	1 2/	Michael Jones, Vice President			
•	re of an afficer or director	Printed or typed name and title			
I hereby accept I further ugree performance of agent. Or, if th hereby confirm	the appointment as registered agen to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notifi	it and agree to act in this capacity, statutes relative to the proper and complete nd accept the obligation of my position as ref reflect a change in the registered office addi- ted in writing of this change.	gistered ess, I	,	
By:	poration System	8/31/2015			
-	nature of Registered Agent	Date			
If signing on be	half of an entity:				
	ssistant Secretary				
ı	ped or Printed Nume				

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E043 (03/12)