# N15000003328

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
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ALBRITTON

#### **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Old Still Homeowners Association, Inc.

Name of Corporation

DOCUMENT NUMBER. NT

N15000003328

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:

#### Patti McDonald

Name of Contact Person

**Evergreen Lifestyles Management LLC** 

Firm/Company

10401 Deerwood Park Blvd, Suite 2130

Address

Jacksonville, FI 32256

City/State and Zip Code

### pmcdonald@evergreen-lm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patti McDonald

.,,877

221-6919

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
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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Old Still Homeowners Association, Inc.
2. The principal office address: 10401 Deerwood Park Blvd, Suite 2130  Jacksonville, Fl 32256
3. The mailing address (if different):
4. Date of incorporation/qualification: 4/1/15 Document number: N15000003328
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Shawn Budd
5323 MILLENIA LAKES BOULEVARD, SUITE 200
ORLANDO, FL 32839
ORLANDO, FL 32839  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Evergreen Lifestyles Management LLC  10401 Deerwood Park Blvd, Suite 2130
Evergreen Lifestyles Management LLC
P.O. Box NOT acceptable
Jacksonville, FI 32256
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Shawn Budd, President
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 performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Sheli Moran as agent 1/24/13 Signature of Registered Agent Date
If signing on behalf of an entity:
Sheli Moran as agent
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)