## N15366

(Requestor's Name)		
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(Address)		
(City/State/Zip/Phone #)		
(=13,-2.11,-12.17)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Special instructions to Fitting Officer.		





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SECRETARY OF STATE
SECRETARY OF STATE

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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SWEETWATER CONDOMINIUM ASSO	OCIATION, INC.
(Name	of corporation)
DOCUMENT NUMBER: N15366	
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Donna M	
(Nam	c of person)
First Choice Associati	
(Name of	firm/company)
4174 Woodland	
(/	Address)
Palm Harbor, Flo	
(City/stat	te and zip code)
For further information concerning this matter, please of	call:
Donna Miraglia (Name of person)	at ( 727 ) 785-8887 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Depar	· · · · · · · · · · · · · · · · · · ·
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

TO:

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

Pursuant to the	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S	tatutes, this statement of
-	nitted for a corporation organized under the laws of the State of <u>FLORIDA</u>	in order
to change its re	egistered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: Sweetwater Comdominium Association, Inc.	
2. The principa	al office address: c/o First Choice Association Management	
3. The mailing	; address (if different): 4174 Woodlands Pkwy, Palm Harbor, Florida 3468	36
4. Date of inco	prporation/qualification: 06/12/1986 Document number: N15366	
	nd street address of the current registered agent and registered office on file with partment of State:	h the TALL
	Eddy G. Hauer	
	4218 Riverside Drive	SSS
	Tampa, Florida 33602	SSEE. FLOOR
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered off	126 LORIOA
	James Nolan, Sr. c/o First Choice Association Management	
	4174 Woodlands Pkwy	
	(P.O. Box or personal mailbox NOT acceptable)	
	Palm Harbor, Florida 34685	<u> • 4.,                                    </u>
The street add changed will b	dress of its registered office and the street address of the business office of it be identical.	s registered agent, as
Such change v	was authorized by resolution duly adopted by its board of directors or by an the corporation has been notified in writing of the change.	officer so authorized by
4	Lisa Boh	name and title)
I hereby accept I further agreed duties, and I a being filed me been notified i	pt the appointment as registered agent and agree to act in this capacity, ie to comply with the provisions of all statutes relative to the proper and con am familiar with and accept the obligation of my position as registered ages erely to reflect a change in the registered office address, I hereby confirm the in writing of this charge.	nplete performance of my nt. Or, if this document is at the corporation has
Jam	- M. Hote 11/10/03	
		Date)
If signing on b	behalf of an entity:	
· · · · · · · · · · · · · · · · · · ·	(Typed or Printed Name) (Ca	pacity)

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