N15977

SENTRY Management_{No.}

2180 State Road 434 W Ste 5000 Longwood FL 32779-5044 KS0290-P

(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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SECRLIARY OF STATE

05/26/05--01013--014 **35.00

The State of the s

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

	e provisions of sections 607.0502, 617.0502, 607.15		
-	of change is submitted for a corporation organized und	-	-
<u>FLORIDA</u>	in orde <u>r to</u> change its registered office or reg	istered agent, or bot	h, in the State
of Florida. 1. The name of	the corporation: PARKSIDE VILLAS AT MEADOW	WOODS HOMEOWNER	S ASSOCIATION, INC .
2. The principal	l office address: 2180 W SR 434 STE 5000		
<u> </u>	LONGWOOD FL 32779-5044		·
3. The mailing	address (if different):		
4. Date of incor	rporation/qualification: 07/21/1986 Docum	ment number: N15	977
	nd street address of the current registered agent and regartment of State:	istered office on file	with the
	LELAND MANAGEMENT		
	8009 S ORANGE AVE		77 <u>8</u> 8
	ORLANDO FL 32809		C M
6. The name and changed):	nd street address of the new registered agent (if cha	nged) and /or regist	<u>m</u> ≺
	JAMES W HART JR		
	SENTRY MANAGEMENT INC		STATION STATION
,	(P.O. Box or personal mailbox NOT acceptable) 2180 W SR 434 STE 5000 LONGWOOD FL 32779-5044		DA 0
	ress of its registered office and the street address of the ged will be identical.		
M. K.	vas authorized by resolution duly adopted by its board the board, or the corporation has been notified in write the board of the board (Printed)	of directors or by an ing of the change.	n officer so
I hereby accept I further agree performance of registered agen office address,	t the appointment as registered agent and agree to a to comply with the provisions of all statutes relative f my duties, and I am familiar with and accept the ob nt. Or, if this document is being filed merely to reflec I hereby confirm that the corporation has been notif	to the proper and co ligation of my positi et a change in the re ied in writing of this	mplete on as इistered change.
	- Aut	5/29/05	
	Signature of Registered Agent)	(Date)	
If signing on behalf		DDECIDENT	
JAMES W H	TART UK (Typed or Printed Name)	PRESIDENT (Capacity)	

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