## N17000006347

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## COVER LETTER .

TO:	Amendment Section
	Division of Corporations

SUBJECT: Stoneridge at Agersworth Community Association, Inc.

DOCUMENT NUMBER: N17000006347

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:

Name of Contact Person

Citadel Property Management Group Inc

Firm/Company

Address Caraca Transfer Cong JR Drive, Ste

City/State and Zip Code

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

For further information concerning this matter, please call:

James Ranglo at (727) 938-7730

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

## 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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Steveridge at Hyers worth Community Association. Inc.
2. The principal office address: 905 E. Montin Lither King Jr Drive, Stc310  Tar Non Springs FL 34689
3. The mailing address (if different):
4. Date of incorporation/qualification: 6/16/17 Document number: N17 00000 634
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)
Corporate Creations Network Inc  801 US Highway
801 US Highway 1
North Palm Beach FL 33408
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Citadel Prop Mant Grp Inc
905 E. Martin Linthen King Jr Drive, Ste310 P.O. Box NOT acceptable
Tarpon Springs, Fr 34689
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.
Mando V. The ORLANDO D. ECHEVADATA PRESCOENT  Printed or typed name and title  Printed or typed name and title
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.
Signature of Registered Agent Date
If signing on behalf of an entity:  Tames Revallo  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 (04/13)