N23074

(Re	equestor's Name)	
(Ad	ldress)	
- (Ad	ldress)	
, (Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	ocument Number)	
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04/17/15--01019--006 **35.00



AJR. 4/22/15

COVER LETTER

TO:	Amendment Section Division of Corporations
SHR	The Fairways Neighborhood Association, Inc.
SUL	Name of Corporation
DOC	M23074 UMENT NUMBER:
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Pleas	e return all correspondence concerning this matter to the following:
	Robert Taylor
	Name of Contact Person
	Becker & Poliakoff
	Firm/Company
	111 N. Orange Ave. Suite 1400
	Address
	Orlando, FL 32801
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For f	urther information concerning this matter, please call:
Rob	Name of Contact Person 407 875-0955 Area Code & Daytime Telephone Number
	Name of Contact Person Area Code & Daytime Telephone Number
Enclo	osed 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

TO:

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

•	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this range is submitted for a corporation organized under the laws of the State of Florida
	er to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: The Fairways Neighborhood Association, Inc.
2. The principal Orlando, F	office address: 14101 Town Loop Blvd. FL 32837
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 10/17/1987 Document number: N23074
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Robert Taylor
	150 N. Westmonte Drive
	Altamonte Springs, FL 32714
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Becker & Poliakoff P.A.
	111 N. Orange Ave. Suite 1400
	P.O. Box NOT acceptable Orlando, FL 32801
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, I be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
	Gwendolyn B. Wnemiller tree
I hereby accept Lfurther agree performance of agent. Or, if th hereby confirm	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Sig	gnature of Registered Agoint Date
If signing on be	ehalf of an entity:
Robert Taylo	or, Shareholder
Т	Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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