

# N23423

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6380

From: Account Name : FOLEY & LARDNER  
Account Number : I19980000047  
Phone : (407)423-7656  
Fax Number : (407)648-1743

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## REGISTERED AGENT CHANGE

ALHAMBRA AT POINCIANA OWNERS ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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Document prepared by: Carol Borglum  
(4563)  
Client/Matter: 095079-0104

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: Alhambra at Poinciana Owners Association, Inc.
2. The principal office address: 500 East Cypress Parkway, Kissimmee, Florida 34759
3. The mailing address (if different):
4. Date of incorporation/qualification: 11/12/1987 Document number: N23423
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)

A.G.C. CO.
200 South Orange Avenue
Orlando, Florida 32801

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
F&L Corp.
One Independent Drive, Suite 1300
Jacksonville, Florida 32202-5017

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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.

Signature of an officer or director (Handwritten signature)

SABRINA ANDERSON, V.P.
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.

F&L Corp.
Signature of Registered Agent (Handwritten signature)

8/10/09
Date

If signing on behalf of an entity:

John A. Sanders, Authorized 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 (8/05)