

N24930

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	
(Oil	y/State/Zip/Filone	#)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nam	ne)
(Do	cument Number)	
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COVER LETTER

TO:	O: Amendment Section Division of Corporations		
SUBJ Name	ECT: Meadowview Property Owners Associat of Corporation	tion, Inc.	
DOC	UMENT NUMBER: N24930		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please	e return all correspondence concerning this	matter to the following:	
Name	of Contact Person		
Rabin	Parker Gurley, P.A.		
Firm	Сотрапу		
2653	McCormick Drive		
Addre	ess		
Clear	water, Florida 33759		
City/S	State and Zip Code		
E-ma	il address: (to be used for future annual	report notification)	
For fi	urther information concerning this matter, p	olease call:	
Cher	yl Morrell, FRP	at (727 \ \475-5535	
	Name of Contact Person	at (727) 475-5535 Area Code & Daytime Telephone Number	
Enclo	osed is a \$35.00 check made payable to the	Department of State.	
	Mailing Address: Amendment Section	Street Address:	
		Amendment Section Division of Corporations	
	Division of Corporations	The Centre of Tallahassee	
	P.O. Box 6327	THE COMME OF THE COMME	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Florida.			
	the corporation: Meadowview Property Owners Association, Inc.			
1. The name of the state of the principalPark, Florida, 33	office address: Condominium Management Group. 7800 66th Avenue North, #203, Finehas			
3. The mailing :	address (if different): same			
4. Date of incor	poration/qualification: 02/22/1988 Document number: N24930			
5. The name and Florida Depa	d street address of the current registered agent and registered office on file with the rtment of State: (It resigned, enter resigned)			
	Richard Zacur			
	5200 Central Avenue			
	5200 Central Avenue St. Petersburg, Florida 33733			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Rabin Parker Gurley, P.A.			
	2653 McCormick Drive			
	P.O. Box NOT acceptable			
	Clearwater, Florida 33759			
as changed will	ress of its registered office and the street address of the business office of its registered agent, I be identical.			
Such change wanthorized by t	he hour, or the corporation has been notified in writing of the change.			
Suffature of an orizon durce. Late Camacho JV.				
of my duties, a	to comply with the provisions of all statutes relative to the proper and complete performance and complete performance and a manification of my position as registered agent. Or, if this sing filed merely to reflect a change in the registered office address, I hereby confirm that the is been notified in writing of this change.			
	greature of Regulated Agent 11/66/24			
If signing an b	Typed or Printed Name Residut			

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