

N25131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

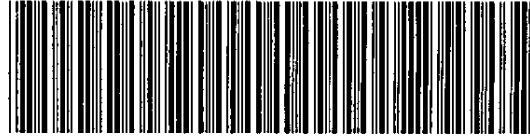
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

2015 AUG 12 PM 3:55

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A RAMSEY

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Crystal Oaks Civic Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N25131

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:

Daniel F. Pilka

Name of Contact Person

PILKA & ASSOCIATES, P.A.

Firm/Company

213 Providence Road

Address

Brandon, FL 33511-4707

City/State and Zip Code

eservice@pilka.com

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

For further information concerning this matter, please call:

Daniel F. Pilka

Name of Contact Person

at (**813**) **653-3800**

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: Crystal Oaks Civic Association, Inc.
2. The principal office address: c/o PILKA & ASSOCIATES, P.A.
213 Providence Road, Brandon, FL 33511-4707
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 03/01/1988 Document number: N25131
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)

Hedda Smith
5417 W. Heather Ridge Path
Lecanto, FL 34461

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Daniel F. Pilka
c/o PILKA & ASSOCIATES, P.A.
P.O. Box NOT acceptable
213 Providence Road, Brandon, FL 33511-4707

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DEPARTMENT OF STATE

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.

Sonia Gehrke
Signature of an officer or director

SONIA GEHRKE PRES. COCA
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]
Signature of Registered Agent

8-10-15
Date

If signing on behalf of an entity:
Daniel F. Pilka
Typed or Printed Name

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