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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number))
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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RA Change

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Country Howen Condominium 5 Association, Inc. Name of Corporation
DOCUMENT NUMBER: N26248
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:
Stephen & Williams Name of Contact Person
Southwest Property Management Inc.
1044 Castello Dr. 5te 204 Address
Oaples, F1. 34113 City/State and Zip Code
Swilliams & suproprigt.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stephen E. Williams at 237 261-3440 Zm & Area Code & Daytime Telephone Number T
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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

Pursuant to the provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, 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: Country Haven 5 Condominium Assoc. Inc.
2. The principal office address: As 11sted below. (Sauthwest)
3. The mailing address (if different): As listed below.
4. Date of incorporation/qualification: Document number:N 26298
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)
265 Airport D.S.
Naples, F1. 34104
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Southwest Property Management Coxporation 1044 Castello Dr. Ste. 206. P.O. Box NOT acceptable
1) aples, F1. 34103
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 Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. 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 cif 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 11/13/13 Date Date
If signing on behalf of an entity:
Stephen E. Williams 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)