126985

(Requestor's Name) (Address) (Address)	200019079792
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL (Business Entity Name)	06/18/0301016005 **35.00
(Document Number)	OS JUN 18 TALLAHASS
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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: SUNDANCE, (Name of corporation) HOME OWNERS ASSOCIOOP
DOCUMENT NUMBER: N 26986
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:
Priscilla C. Jensen (Name of person)
Sundance Mobile Home Park (Name of firm/company)
36911 Sunvalley Dr. (Address)
Zephyrhilla - Fl 33540 (City/state and zip code)
For further information concerning this matter, please call:
Princella (Name of person) at (8/9) 783-7/5/ (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

TO:

Amendment Section

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Taliahassee, FL 32399

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
	f 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.	the corporation: Jundance to Meoloners Association,
1. The name of	the corporation. Total of the topological state of the corporation of
	office address: 6340 Santa FE DRIVE
	phyrhills, Fl. 33542
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 1988 Document number: N26985-
5. The name and	d street address of the current registered agent and registered office on file with the
Florida Depar	rtment of State:
	Busack (myndret)
	6220 Red Foother Dr. Sign 1
	Zaphynhills-Fl. 335
	nd street address of the new registered agent (if changed) and /or registered office dif
changed):	Christian Robin, Attorney
•	
_	37.512 Skyridge Circle (P.O. Box or personal mailbox NOT acceptable)
_	Dade City, FL 33525
	ess of its registered office and the street address of the business office of its registered ed will be identical.
	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
(Signature of an officer,	chairman of vice chairman of the board (Printed or typed name and title)
I hereby accept I further agree performance of registered agen office address, I	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 my duties, and I am familiar with and accept the obligation of my position as t. Or, if this document is being filed merely to reflect a change in the registered I hereby confirm that the corporation has been notified in writing of this change.
- Chuthis	an of the figure of Registered Agent) (Date)
If signing on behal	f of an entity:
Τ)	Typed or Printed Name) (Capacity)

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