N27325

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
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C. CARROTHERS

COVER LETTER

Amendment Section

TO:

Division of Corporations
SUBJECT: Fisherman's Wharf Property Owners Association Name of Corporation
DOCUMENT NUMBER: N 27325
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:
Lou Ann Horton Name of Contact Person Transwestern Firm/Company 3063 Hercy Drive, Suite G Address Orlando, FL 32808 City/State and Zip Code Louann. horton & transwestern. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lou Ann Horton at (407) 293-6090 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person 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 Florids————————————————————————————————————
1. The name of the corporation: Fi sherman's What F Troporty Owners Association 2. The principal office address: 3063 mercy Drive Svite to Orlando FL 32803
3. The mailing address (if different):
4. Date of incorporation/qualification: 7 88 Document number: 127325
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) Transwestern 3043 mercy Drive \$4.65 Oclando, 12 32808
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
hos Ann Horton 3063 mercy Dave Suite 6- P.O. Box NOT acceptable Ortando, FL 32808
The street address of its registered office and the street address of the business office of its registered agants as changed will be identical. Such changenvas authorized by resolution duly adopted by its board of directors or by an officer so outhorized by fine board, or the corporation has been notified in writing of the change. Signature of an officer director When the appointment as registered agent and on ree to act in this capacity. In the appointment as registered agent and on ree to act in this capacity. In the appointment as registered agent and on ree to act in this capacity. In the appointment as registered agent and on ree to act in this capacity. In the appointment as registered agent and on real 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 his document is being filed merely to reflect a change in the registered office address, hereby confirm that the corporation has been notified in writing of this change. Signature of Registered Agent Date The signing on behalf of an entity:
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 (03/12)