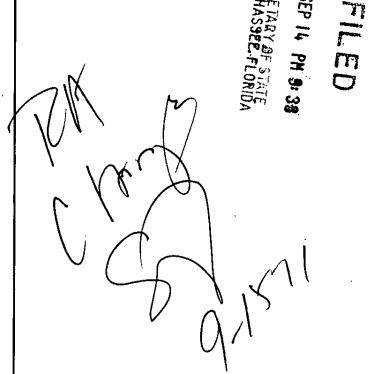


(R	equestor's Name)	
(A	ddress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	



09/14/11--01005--025 **35.00



COVER LETTER

Division of Corporations		
SUBJECT: Country address Community association, Inc		
DOCUMENT NUMBER: N 29145		
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:		
Theresa D. Sutherland Name of Contact Person		
Sutherland Management Firm/Company		
107 N. Lia DC. Address		
City/State and Zip Code		
Smachonald & Sutherland management. Com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Therese Sutherland at (40) 774-7362 X 02 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 Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Country address Community association
2. The principal office address: 107 N hige Dc
3. The mailing address (if different):
5. The maning address (ii different).
4. Date of incorporation/qualification: 11 04 1988 Document number: N29145
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)
Katzman, Garfinkel + Berger
1501 Northwest 49th Street - Second Floor
Fort Laudordale FL 33309
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Sutherland Management Inc. 35 5 7
P.O. Box NOT acceptable
P.O. Box NOT acceptable Oppka FL 32703
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 KENNETH C. SULLUMA PRESCOENT 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.
Allewa D. Sattered Agent 9-12-11 Signature of Registered Agent Date
If signing on behalf of an entity:
Theresa D Sutherland Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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