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COVER LETTER

TO:	Amendme Division è	ent Section of Corporations			
SUBJ	ECT: La	akeview Villag	ge Condominium Name of Corpo	n No. 13 Assoc., I	inc.
DOCI	U MENT NU	JMBER:	N30	0128	
The er	nclosed State	ement of Change o	f Registered Office/Ag	gent and fee are submitte	ed for filing.
Please	return all co	orrespondence con	cerning this matter to	the following:	
			Anthony So Name of Contac	biech	
			Name of Contac	t Person	
		•	Centurian Group S	envices Inc	
			Firm/Comp		
			P.O. Box 56		
			Address		
			Orlando, FL 32 City/State and Z	856-0698 ip Code	
			•	•	
	-	E mail addraga	centurian02@gr	nail.com re annual report notific	eation)
		E-mail address:	(to be used for futur	e annual report notine	ation)
For fu	rther inform	ation concerning the	nis matter, please call:		
		Anthony Sobied	ch a	t (<u>407</u>) Area Code & Daytim	207-1102
	Na	me of Contact Per	son	Area Code & Daytim	e Telephone Number
Enclos	sed is a \$35.	00 check made pay	able to the Departmen	nt of State.	
		P.O. Box 6	t Section Corporations	Street Address: Amendment Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	oorations Center Circle

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida ange is submitted for a corporation organized under the laws of the State of	Florida	
in orde	er to change its registered office or registered agent, or both, in the State of I	Florida.	
	the corporation: Lakeview Village Condominium No. 13	Association,	Inc.
2. The principal	office address: 54 W. Illiana Street, Unit E		
	Orlando, FL 32806		
3. The mailing a	address (if different): P.O. Box 560698		
	Orlando, FL 32856-0698		
4. Date of incor	poration/qualification: 01/01/89 Document number:	N30128	
	d street address of the current registered agent and registered office on file witment of State: (If resigned, enter resigned)	ith the	
	Anthony Sobiech		
	709 E. Michigan St.	2889 1 SEC	
	Orlando, FL 32806	SECRETAR	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered of	fice A	
	Anthony Sobiech	8: 34 STATE LORID	
	54 W. Illiana St, Unit E		
	Orlando, FL 32806	_	
The street address changed will	ess of its registered office and the street address of the business office of i be identical.	ts registered agent	,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an ne board, or the corporation has been notified in writing of the change.	officer so	
Chil	e of an officer or director AND ROA Class T. Printed or typed name and to	a)	
l harahy accant	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 cond I am familiar with and accept the obligation of my position as registerent filed thereby to reflect a change in the registered office address, I here is been notified in writing of this change.		e 's ?
1th	10/26/09 nature of Registered Agent Date		
	half of an entity:		
	inthony Sobiech		
T	ped 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 * * *