(Requestor's Name)	
(Address)	500241507
(Address)	0002-11001
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	11/11/10 01000 0
(Document Number)	11/14/1201020(
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

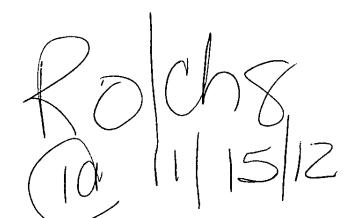
Office Use Only



525

001 **1400.00





COVER LETTER

Division of Corporations	;€	
SUBJECT: VANDERBIL	T LAKES II Nome Name of Corporati	EDWNERS ASSOCIATION, INC
DOCUMENT NUMBER:	30349	
The enclosed Statement of Chan	ge of Registered Office/Agent	t and fee are submitted for filing.
Please return all correspondence	concerning this matter to the	following:
	 Dee Masterson Hayden & Assoc 	
	12650 Whitehall Dr	
•	Ft Myers, FL 33907 dee@hayden-associates.c	
	ace@nayden-associates.t	com
	Address	
	City/State and Zip C	Code
E-mail addr	ess: (to be used for future ar	nnual report notification)
For further information concerni	ng this matter, please call:	
Name of Contact	Person at (Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made	e payable to the Department of	f State.
<u>Mailing</u>	Address:	Street Address: Amendment Section
	ment Section n of Corporations	Amendment Section Division of Corporations
	ox 6327	Clifton Building

Tallahassee, FL 32314

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (03/12)

TO:

Amendment Section

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation ANDERBILT LAKES # Homeowners ASSOCIATION, INC
2. The principal office address: 12650 Whitehall Dr Ft Myers, FL 33907
3. The mailing address (if different):
4. Date of incorporation/qualification: 1201989 Document number: N30349
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)
Haydena ASSCC.
8359 Beacon Blvd, Suite 313 Ft Myers, FL 33907 6. The name and street address of the new registered agent (if changed) and /or registered office
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
12650 Whitehall Dr Ft Myers, FL 33907
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. 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 bereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent Date
f signing on behalf of an entity:
Dee Masterson Martin Typed or Printed Name

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