N31616

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

of the Called

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 Statutes, this nge is submitted for a corporation organized under the laws of the State of FLORIDA to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: TARA VERANDAS COMMONS ASSOCIATION, INC.
2. The principal	office address: 2180 W SR 434 STE 5000
	LONGWOOD FL 32779-5044
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 04/10/1989 Document number: N31616
	street address of the current registered agent and registered office on file with the tment of State:
	HARMONY MANAGEMENT
	4400 EL CONQUISTADOR PKWY STE 1
	BRADENTON FL 34282
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	JAMES W HART JR
	2180 W SR 434 STE 5000
	(P.O. Box NOT acceptable) LONGWOOD FL 32779-5044
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	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.
(Signalu	TRANDOLPH R. MUSSER TRES
I hereby accept I further agree to of my duties, an document is bein corporation has	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 performance and if I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change.
(Sie	gnature of Registered Agent) (Date)
	half of an entity:
JAMES W H	HART JR Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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