

N32257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

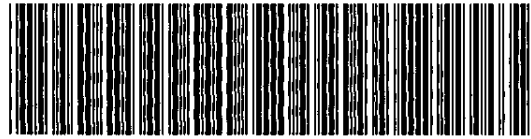
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature and initials

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: St. Tropez Homeowners' Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N32257

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:

Megan Taylor
Name of Contact Person

90 The Continental Group, Inc.
Firm/Company

385 Douglas Ave Ste. 3000
Address

Altamonte Springs, FL 32714
City/State and Zip Code

mtaylor@thecontinentalgroupinc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Megan Taylor at (407) 644-4500 x240
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 30, 2010

MEGAN TAYLOR
385 DOUGLAS AVE STE 3000
ALTAMONTE SPRINGS, FL 32714

SUBJECT: ST. TROPEZ HOMEOWNERS' ASSOCIATION, INC.
Ref. Number: N32257

We have received your document for ST. TROPEZ HOMEOWNERS' ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 910A00020741

RECEIVED

10 OCT 15 AM 8:01

COVER LETTER

SECRETARY OF STATE
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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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: St. Tropez Homeowners' Association, Inc.
2. The principal office address: c/o The Continental Group, Inc. 385 Douglas Ave. Ste. 3000 Altamonte Springs, FL 32714
3. The mailing address (if different):

4. Date of incorporation/qualification: 5/11/1989 Document number: N32257

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 NW 49th Street, 2nd Floor
Ft. Lauderdale, FL 33309

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TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Karen Wonsetler P.A.
860 N. Orange Ave. Ste. 135
Orlando, FL 32801
P.O. Box NOT acceptable

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]
Signature of an officer or director

Bernie Piacenti, President
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.

[Signature]
Signature of Registered Agent

10-8-10
Date

If signing on behalf of an entity:
Karen Wonsetler
Typed or Printed Name

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