## N3248D

(Re	equestor's Name)	
(Address)		
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(Cit	ty/State/Zip/Phone	<del>)</del> #)
. PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	·
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	
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## COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: TH	IE MEADOW AT PARKER A	TAKES NEIGHBORHOOD HOMED PATION, INC.	WUERS!
DOCUMENT N	110-4-		
The enclosed Star	tement of Change of Registered Office/Ag	ent and fee are submitted for filing.	
	correspondence concerning this matter to t		
	Dee Masterson		
	Hayden & Assoc		
	12650 Whitehall Dr		
	Ft Myers, FL 33907		
	dee@hayden-associate	es.com	
	Address	<del></del>	
	City/State and Zi	p Code	
	E-mail address: (to be used for future	annual report notification)	
For further inform	mation concerning this matter, please call:		
1 See Ma	sterson	,239,489-4890	
	ame of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35	5.00 check made payable to the Departmen	t of State.	
	Mailing Address:	Street Address:	
	Amendment Section	Amendment Section	
	Division of Corporations	Division of Corporations	
	P.O. Box 6327	Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



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

Pursuan: 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: THE MEADOW AT PARKER LAKES NEIGHBORHOOT  ADME OWNERS ASSOCIATION, INC.  12650 Whitehall Dr  Ft Myers, FL 33907
3. The mailing address (if different):
4. Date of incorporation/qualification: $\frac{5/24/89}{}$ Document number: $\frac{132480}{}$
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)  House ASSOC-Lic
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 (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  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 hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent Date
If signing on behalf of an entity:
Dee Masterson Madur Typed or Printed Name

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