## N32917

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## TRANSMITTAL LETTER

SUBJECT: THE HAMMOCKS HOMEOWNER'S ASSOCIATION OF OFFANGE CON	4
(Name of corporation)	-
DOCUMENT NUMBER:	
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:	
- Grencer R. Solomon	
(Name of person)	
SOUTHWEST PROPERTY MANAGEMENT	
(Name of firm/company) 113 DESIBLE AJRORA ST.	
WINTER GARDEN, FL 34787	
(City/state and zip code)	
For further information concerning this matter, please call:	
SPENCER R. 50LOMON 407 656-1081  (Name of person) (Area code & daytime telephone number)	
(Name of 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 409 E. Gaines Street Tallahassee, FL 32399

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

Pursuant to the p	rovisions of sections 607. crnoration organized unde	0502, 617.0502, 6	07.1508, pr 617.15(	18, Florida Statutes,
the undersigned co	orporation organized unde	r the laws of the Si	tate of PUNIVI	1
submits the follow	ring statement in order to d	change its register	ed office or register	ed agent, or both, in
the State of Florid	a. THE HAT	nmocks Hon	neownem's A	ssociation o
1. The name of the	COLDOLATION .	ER COTHAN	L .	
				<b>A</b> . ()
2. The mailing add	lress of the corporation:	(367 2 2 11H)	bulge TV. H	110
<u> </u>	O	1068 LL 21	4761	75E F
3. Date of incorpo	oration/qualification: 6-3	1-89	Document number:	N3年10至
4. The name and a	ddress of the current regist	ered agent and reg	istered office:	SERVE
	JAMES W. HARY	JR.		6. C. S. E.
	2180 W. 58 434	50166 5000		
	LOHOWOOD FU 3			Du a
		<u> </u>		
5. The name and a	ddress of the new registere	ed agent (if change	d) and /or registered	office (if changed):
	SACACCA R. S.C.	OX NOT Acceptat	ole)	
<u> </u>	113 DESIRCE A			. =
<b></b> ,,,,			-i -	
	WINTER GARD	en, 50 347	871	
The street address agent, as changed	of its registered office and, will be identical.	d the street addres	s of the business off	ice of its registered
Such change was authorized by the	authorized by resolution d	luly adopted by its		
77000	7 That		12-7	28-03
	an officer, chairman of vice chairm	an of the board)		Date)
RODER	r nokey			
•	(Printed or typed name and title	)		
Having been name corporation, I her I further agree to	ed as registered agent and ebyaccept the appointment comply with the provision y duties, and I am familian	l to accept service nt as registered ag s of all statutes re r with and accept	of process for the a gent and agree to ac lative to the proper the obligation of my	bove stated t in this capacity. and complete
registered ligent	1). Solomon	win and accept	12-28-03	posmen us
(Sign	ature of Registered Agent)		(Date)	
If signing on behalf of	Fanentity COMON	/	property me	HAGER
(Тур	ped or Printed Name)		(Capacity)	

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