1/39240

(Requestor's Name)					
(Addre	5 S)	· - · - · - · - · - · - · - · - · · - · · - ·			
(Address)					
Q	,				
(Cityle	tate/Zip/Phor	o #0			
(City/S	tate/Zip/Pnor	e #)			
PICK-UP	WAIT	MAIL			
(Busine	ess Entity Na	me)			
(Docur	nent Number)			
Certified Copies	Certificate	s of Status			
Special Instructions to Filir	ng Officer:				
ľ					

Office Use Only



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12/13/10--01021--020 **35.00



C.COULLIETTE
DEC 14 2010

EXAMINER

COVER LETTER

TO: Amendme Division o	nt Section f Corporations				
SUBJECT:		e Communi		ion, Inc.	
DOCUMENT NU	omber:	N3924	10		•
The enclosed State	ment of Change of Registe	red Office/Agent	and fee are sub	mitted for filing.	
. •	prrespondence concerning t	_		·	
		Lisa Kelley me of Contact Pe		endelen en e	,
	IBYI	me of Confact Pe	ISOII		•
	Sentr	y Managemer	nt, Inc.	· · · · · · · · · · · · · · · · · · ·	
		Firm/Company			
	2180 We	est S.R. 434, S	uite 5000		
		Address			
	Lon	gwood, FL 32	2779		
	Cit	y/State and Zip C	code		
•	INFORMATI E-mail address: (to be us	ON@SENTRY		tification)	
	•		•	·	
For further informa	tion concerning this matter	, please call:			
	LISA KELLEY	at (407	788-6700	
. Nan	ne of Contact Person	Ā	rea Code & Day	788-6700 ytime Telephone Numb	эет
Enclosed is a \$35.0	0 check made payable to th	e Department of	State.		
	Mailing Address: Amendment Section		Street Addre Amendment		
	Division of Corpora P.O. Box 6327	nons	Division of Clifton Build		
	Tallahassee, FL 323	14		ive Center Circle	

TO:

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

4

statement of cha	unge is submitted for a co	orporation organize	607.1508, or 617.1508, Florida d under the laws of the State of d agent, or both, in the State of	r Florida			
1. The name of	the corporation: Sylva	n Grove Com	munity Association, I	ne.			
	2. The principal office address: 2180 West S.R. 434, Suite 5000						
		ood, FL 32779					
3. The mailing a	address (if different): Sa	me as Principal	Office Address				
4. Date of incor	poration/qualification:	07/12/1990	Document number:	N39240			
	d street address of the cur rtment of State: (If resign		at and registered office on file v	vith the			
•	Barfield, James A			-			
٠	19790 Southern H	ills Bivd					
	Brooksville FL 34	601 US		and the same of th			
6. The name and (if changed):			if changed) and /or registered o	DEC TO DEC			
	James W. Hart, Jr.			— C 13			
	Sentry Manageme	nt, Inc./2180 We P.O. Box NOT ac	est S.R. 434, Suite 5000	92			
	Longwood, FL 327			OF ST ORTORN AM 10:			
The street address changed will	ess of its registered offic		dress of the business office of	its registered agent,			
Such change we authorized by the	as authorized by resolut ne board, or the corpora	ion duly adopted b tion has been notifi	y its board of directors or by a ed in writing of the change.	n officer so			
Signatur	re of an officer or director		Princed or typed name and	title			
Thereby accept I further agree of my duties, an document is bei corporation has	the appointment as reg to comply with the prov of I am familiar with an ng filed merely to reflec been notified in writin	istered agent and a isions of all statute d accept the obliga et a change in the r g of this change.	gree to act in this capacity, s relative to the proper and co tion of my position as register egistered office address, I her	omplete performance red agent. Or, if this eby confirm that the			
	to		12/7/10				
2	nature of Registered Agent		Dute				
if signing on be	half of an entity:						
	ames W. Hart, Jr. yped or Printed Name						

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