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Ra Chang

COVER LETTER

TO: Amendment Section Division of Corporations	
River Forest Reserve Property Owner's Association, Inc.	
Name of Corporation	
DOCUMENT NUMBER: N49398	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted	l for filing.
Please return all correspondence concerning this matter to the following:	
Lisa Lichtenberg	
Name of Contact Person	
Firm/Company	
11855 Gail Drive	
Address	
Temple Terrace, FL 33617	
City/State and Zip Code	
lisalichtenberg1@aol.com	
E-mail address: (to be used for future annual report notifica	tion)
	tion)
For further information concerning this matter, please call:	60
Lisa Lichtenberg,813 766-3	3847 ***

Enclosed is a \$35.00 check made payable to the Department of State.

Name of Contact Person

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

Area Code & Daytime Telephone Number

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

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes organized under the laws of the State of <mark>Florida</mark> egistered agent, or both, in the State of Florida.	_	_
1. The name of t	the comporation: River Forest R	Reserve Property Owner's Associa	ation,	Inc.
2. The principal	office address: 11855 Gail Dri	ve, Temple Terrace, FL 33617		
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: June 16,	1992 Document number: N49398		
5. The name and		red agent and registered office on file with the		
	Eric N. Appleton, Esq r	resigned		
	501 E. Kennedy Blvd. St	uite #802		
	Tampa, FL 33602			
6. The name and (if changed):	l street address of the new registered	l agent (if changed) and /or registered office	13 NOV	- SEVE 2
	Lisa Lichtenberg		9	
	11855 Gail Drive		PE	기업 기업 기업
	Temple Terrace, FL 336	NOT acceptable	3: 00	A167
The street address changed will	ess of its registered office and the st	reet address of the business office of its regist	ered age	ent.
· -		opted by its board of directors or by an officer in notified in writing of the change.		
Den	Deanna Boss - Vice President		_	
I hereby accept I further agree performance of	the of an officer or director the appointment as registered ager to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notif	Printed or typed name and title at and agree to act in this capacity, statutes relative to the proper and complete and accept the obligation of my position as reg breflect a change in the registered office addre and arrived in writing of this change.	gistered ess, I	
		Lisa Lichtenberg - Treasurer	•	
Sig	nature of Registered Agent	Date		_
If signing on be	half of an entity:			
Т	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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