N49833

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Island Cove Villas at Meadow Woods HOA (Name of Corporation)
DOCUMENT NUMBER: N49833
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:
Anne M. Smith, LCAM
(Name of Contact Person)
Pinnacle Property Management, LLC (Firm/Company)
1511 East SR 434, Suite 3001 (Address)
Winter Springs, FL 32708 (City/State and Zip Code)
For further information concerning this matter, please call:
Tracy A. Ayotte, LCAM at (407) 977-0031 (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

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

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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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Island Cove Villas at Meadow Woods Homeowners Association, Inc.
2. The principal office address: 1511 East SR 434, Suite 3001
Winter Springs, FL 32708
3. The mailing address (if different):
4. Date of incorporation/qualification: 07/08/1992 Document number: N49833
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)
Steven D. Asher
1801 Cook Avenue Orlando, FL 32806 FIL
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Pinnacle Property Management, LLC
1511 East SR 434, Suite 3001 (P.O. Box NOT acceptable)
Winter Springs, FL 32708
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 disprector) Koren Profession Resident (Printed or typed nagric 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.
Mme M. Hard 4/9/69 (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
ANNE M. SMINI (Typed or Printed Name)
5.41

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