

N 93000004271

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TALLAHASSEE, FLORIDA

REACH

9/30/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Forest Ridge at Fountain Lakes Neighborhood Assoc.
Name of Corporation

DOCUMENT NUMBER: N93000004271

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:

Michael J. Towns
Name of Contact Person

Firm/Company

22131 Seashore Circle
Address

Estero, FL 33928
City/State and Zip Code

MrMayor1@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael J. Towns at (239) 249-9545
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**

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: Forest Ridge at Fountain Lakes Neighborhood Assoc. Inc.

2. The principal office address: 22131 Seashore Circle, Estero, FL 33928

3. The mailing address (if different): PO Box 808, Estero, FL 33928

4. Date of incorporation/qualification: 09/16/1993 Document number: N93000004271

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)

R & P Property Management

265 Airport Road South

Naples, FL 34104

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Michael J. Towns

22131 Seashore Circle

P.O. Box NOT acceptable

Estero, FL 33928

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TALLAHASSEE, FLORIDA

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.

* Carlene Cummings
Signature of an officer or director

Carlene Cummings/President

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]
Signature of Registered Agent

8/28/10
Date

If signing on behalf of an entity:

Michael J. Towns
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent and registered office, in the state of Florida.

1. The name of the company is:

Forest Ridge at Fountain Lakes Neighborhood Association, Inc.


2. The name and address of the registered agent and office is:

Michael J. Towns

22131 Seashore Circle

Estero, Florida 33928

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.


Michael J. Towns, LCAM