N93000004314

Requester's Name

Address

City/State/Zip Phone #

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-04/11/01--01061--014
*****35.00 *****35.00

Office Use Only

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. ________________ (Corporation Name) ________________ (Document #)
2. ________________ (Corporation Name) ________________ (Document #)
3. ________________ (Corporation Name) ________________ (Document #)
4. ________________ (Corporation Name) ________________ (Document #)

- ☐ Walk in
- ☐ Pick up time ________
- ☐ Certified Copy
- ☐ Mail out
- ☐ Will wait
- ☐ Photocopy
- ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☑ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

T BROWN APR 18 2001

CR2E031(7/97)

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, the undersigned corporation organized under the laws of the State of FLORIDA *submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation is: STONEBRIDGE MAINTENANCE ASSOCIATION, INC.

2. The mailing address of the corporation is: P.O. BOX 1747, SANFORD, FL 32772

3. Date of incorporation/qualification: Sept. 24, 1993 Document number: N93000004314

4. The name and address of the current registered agent and office:

ANGELIA GORDON PROPERITY MANAGEMENT, INC.
312 W. FIRST ST., STE 404
SANFORD, FL 32771

5. The name and address of the new registered agent and office: (P. O. Box **Not** Acceptable)

ANGELIA GORDON PROPERITY MANAGEMENT, INC.
206 ELM AVENUE
SANFORD, FL 32771

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.

Ron Noble 4/4/01
(Signature of an officer, chairman or vice chairman of the board) (Date)

RON NOBLE, VICE PRESIDENT
(Printed or typed name and title)

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Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Angelia Gordon 4/9/01
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

ANGELIA GORDON PROP. MGMT, INC. PRESIDENT
(Typed or Printed Name) (Capacity)

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

DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314