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(Requestor's Name)	
(Address)	500131678
(Address)	
(City/State/Zip/Phone #)	06/26/0801014014
(Business Entity Name)	-
(Document Number)	SECRE
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COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJI	ECT: Property Owners of the Reserve,	Inc.		
	(Name of Co	i poration)		
DOCU	JMENT NUMBER:_N94000002557			
The en	closed Statement of Change of Registered Office,	Agent and fee are submitted for filing.		
Dlanca	return all correspondence concerning this matter	to the following:		
ricasc	return an correspondence concerning this matter	to the following.		
	Horace Webb			
(Name of Contact Person)				
	(Firm/Cor	mpany)		
	7825 Sable Lake Drive			
	(Addre	ess)		
	Port St. Lucie, Florida 34986			
(City/State and Zip Code)				
For fur	ther information concerning this matter, please ca	all:		
Horace	e Webb (Name of Contact Person)	at (772) 467-1711 (Area Code & Daytime Telephone Number)		
	(Name of Contact Leison)	(Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of State.				
	Mailing Address	Straat Addrass		
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	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, statement of change is submitted for a corporation organized under the laws of the State of Florida	this		
in order to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of the corporation: Property Owners of the Reserve, Inc.			
2. The principal office address: 7825 Sable Lake Drive			
Port St. Lucie, Florida 34986			
3. The mailing address (if different):			
4. Date of incorporation/qualification: 05/20/1994 Document number: N94000002557			
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	دم		
Richard E. Cota	SEC SEC		
8840 One Putt Place	超星		
Port St. Lucie, Florida 34986	SSEE.		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Jane L. Cornett, Esq.			
401 E Osceola Street (P.O. Box NOT acceptable)			
Stuart, Florida 34994			
The street address of its registered office and the street address of the business office of its register as changed will be identical.	ered agent,		
Such change was authorized by resolution duly adopted by its board of directors or by an officer authorized by the board, or the corporation has been notified in writing of the change.	so		
Signature of an officer or director) 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 p of my duties, and I am familiar with and accept the obligation of my position as registered agent document is being filed merely to reflect a change in the registered office address, I hereby confit corporation has been notified in writing of this change. Signature of Registated Agent) (Date)	erformance . Or, if this rm that the		
If signing on behalf of an entity:			
A and the transfer			
(Typed or Printed Name)			
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314			

CR2E045 (8/05)