N94000003684

(Requestor's Name) (Address) (Address)		
(City/State/Zip/Phone #)	11/09/2001009008 **35	
(Business Entity Name) (Document Number)	202.	
Certified Copies Certificates of Status Special Instructions to Filing Officer:	મું સુ ઇડ્ડ	
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**35.00

DEC 15 2070 I ALBRITTON

COVER LETTER

Amendment Section Division of Corporations

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TO:

SUBJECT: Valleydale Ro Assoc Inc Name of Corporation		
DOCUMENT NUMBER: N94000003684		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matt	er to the following:	
Bonnie Nelson, Office Manager		
Name of Contact Person		
Valleydale RO Assoc Inc		
Firm/Company	·	
37501 Martindale Ave		
Address		
Zephyrhills, FL 33542		
City/State and Zip Code		
vnihp@tampabay.rr.com		
E-mail address: (to be used for future annual repo	ort notification)	
For further information concerning this matter, please	call:	
Bonnie Nelson, Office Manager	at (813)782-6268 Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of ch	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida change is submitted for a corporation organized under the laws of the State of order to change its registered office or registered agent, or both, in the State of	f Florida
1. The name of	of the corporation: Valleydale RO Assoc Inc	
2. The principa	pal office address: 37501 Martindale Ave. Zephyrhills. FL 33542	
3. The mailing	ng address (if different):	
4. Date of inco	corporation/qualification: August 10, 1994 Document number: N94000	0003684
	and street address of the current registered agent and registered office on file epartment of State: (If resigned, enter resigned)	with the
	Sylvia Kallgren	
	6736 Lum Drive	
	Zephyrhills, FL 33542	
6. The name ar (if changed):		office
	Richard Rendall	
	37501 Martindale Ave	<u>—</u>
	P.O. Box NOT acceptable Zephyrhills, FL 33542	
The street added as changed will	Idress of its registered office and the street address of the business office of will be identical.	`its registered agent,
Such change wanthorized by	was authorized by resolution duly adopted by its board of directors or by a y the board, or the corporation has been notified in writing of the change.	in officer so
May	Ale Leur Gayle Teri, President	
I hereby accept I further agree of my duties, a document is be corporation he	Printed or typed name and agree to act in this capacity, eet to comply with the provisions of all statutes relative to the proper and co and I am familiar with and accept the obligation of my position as registed being filed merely to reflect a change in the registered office address. I her has been notified in writing of this change.	
	Missistered Agent Date	
Si	Signature of Registered Agent Date	
	behalf of an entity:	
	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 (04/13)

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