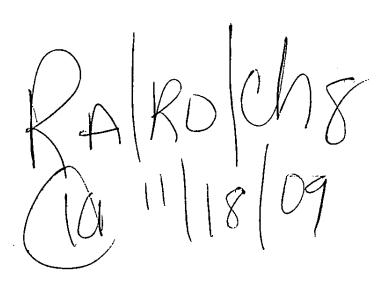
(Re	equestor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	:y/State/Zip/Phon	e #)		
<u></u>	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
:				

Office Use Only



600162130966

11/16/09--01025--015 **35.00



COVER LETTER

то:	Amendmen Division of	t Section Corporations		
SUBJ	ECT:	Easton Park Homeov	vners Association, Incomplete Of Corporation	<u>. </u>
DOCU	J MENT NU I	MBER:N	95000001144	
The en	closed Stater	nent of Change of Registered O	ffice/Agent and fee are subm	itted for filing.
Please	return all con	respondence concerning this m	atter to the following:	
	-		vin Davis Contact Person	
			gement Specialists, Inc.	
			way Street Suite 220 Address	
		Ovied City/Sta	o, FL 32765 te and Zip Code	
		kevin@cn	nsorlando.com	
	_	E-mail address: (to be used f		fication)
For fu	rther informa	tion concerning this matter, plea	ase call:	
		Kevin Davis	at (407)	359-7202
	Nan	ne of Contact Person	Area Code & Dayt	359-7202 ime Telephone Number
Enclos	sed is a \$35.0	0 check made payable to the De	epartment of State.	
		Mailing Address: Amendment Section Division of Corporation: P.O. Box 6327 Tallahassee, FL 32314	Clifton Buildi	ection orporations ing ve Center Circle

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

Pursuant to the provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, 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.
The name of the corporation: Easton Park Homeowners Association, Inc. The principal office address: 1750 W Broadway St Suite 220, Oviedo, FL 32765
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/09/95 Document number: N95000001144
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)
Rita Drummer
169 Easton Circle 코널
Oviedo, FL 32765
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Kevin Davis c/o Community Management Specialists, Inc. 1750 W Broadway Street Suite 220
Kevin Davis c/o Community Management Specialists, Inc.
1750 W Broadway Street Suite 220
P.O. Box NOT acceptable
Oviedo, FL 32765
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 or director Rogan P. DADAY 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.
10/1/09
Signature of Registered Agent If signing on behalf of an entity:
Kevin Davis Typed or Printed Name

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