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## FILED May 18, 2000 8:00 am Secretary of State

05-01-2000 90428 036 \*\*\*\*61.25

## DOCUMENT # N9500001608

1. Entity Name

DYREHAVEN HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

8233 GREENMONT AVE. TALLAHASSEE FL 32311 8233 GREENMONT AVE. TALLAHASSEE FL 32311-8658

2. Principal Place of Business 20/4 DYREHAVEN DA. Suite, Apt. #, etc.		3. Mailing Address  2014 Dyrunvun Du., Suite, Apt. #, etc.		Dr.	DO NOT WRITE IN THIS SPACE			
7in	ALASSLE , PL	City & State TA   IA   Insse	e, F	·	59-3345297	Not	olled For Applicable	
32	311 USA	323//	USA		of Status Desired	Fee Required		
6. Name and Address of Current Registered Agent WALKUP, JOHN M 8233 GREENMONT AVE. TALLAHASSEE FL 32311				7. Name and Address of New Registered Agent  Name EDWARD T. TOWEY  Street Address (P.O. Box Number is Not Acceptable)  2014 DYTELAVEN Dr.  City TAILALASSEL FL Zip Code 323//				
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.  SIGNATURE  Signature, tiped or printed name of registered agent and title it applicable.  (NOTE: Registered Agent algorithm rejustating)  PLE NOW:  9. Election Campaign Financing FILE NOW:  FEE IS \$61.25  Make Check Payable to Department of State								
10,	OFFICERS AND DI	DECTORS	11,	ADDITIONS (CH	MIGES TO OSSICER	S AND DIRECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STOKELY, LARRY 8229 GREENMONT AVE. TALLAHASSEE FL 32311	☐ Delete	TITLE NAME STREET ADDRESS	VO SHARON PI 8247 Quein TAUAHASSE	EPMEIER ANNA DA	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEBB, FLOYD G III 8235 GREENMONT AVE. TALLAHASSEE FL 32311	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD   WALKUP, JOHN 8233 GREENMONT AVE. TALLAHASSEE FL 32311	☐ Delete ·	NAME STREET ADDRESS CITY-ST-ZIP	PATALIE U 2042 DYR TALIAHASSE	Chaven Dr.	. Exchange	Addition -	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WEBB, SANDY 8235 GREENMONT AVE. TALLAHASSEE FL 32311	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP	FULEROY PE 2009 DYI TAIIALASS	PPER relaven Da	™Change L. 323//	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TOWEY, EDWARD J 2014 DYREHAVEN DR TALLAHASSEE FL 32311	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<del>- <b>, .</b></del>	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
	certify that the information supplied wid d on this report or supplemental report poration or the receiver or trustee em t, or on an attachment with an address	th this filing does not qualify for this troe and accurate and that my cowered to execute this report as with all other like empowered.		ed in Section 119.07(3) ave the same legal effect pter 617, Florida Statute	(i), Florida Statutes. I ct as if made under or s; and that my name	further certify that the i ath; that I am an officer appears in Block 10 or	ntormation or director Block 11 if	

CORRECTOR MAY 15, 2000

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR