N95000005799 Joel Foster _10735 Mariannelane New PortRichey Fl. 34654 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) Certified Copy Walk in Pick up time Certificate of Status Mail out ☐ Will wait ☐ Photocopy 900004135829 **NEW FILINGS** AMENDMENTS *****35,00 Profit Amendment Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Domestication Dissolution/Withdrawal Other Merger REGISTRATION/QUALIFICATION **OTHER FILINGS** Foreign Annual Report Limited Partnership Fictitious Name Reinstatement Trademark Other Examiner's Initials

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 Horida
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: December Gation Have owners' Association, Inc.
2. The mailing address of the corporation: 121 N. Osceola Nerwe Clear Water, Furida 33155
3. Date of incorporation/qualification: 12/8/95 Document number: N950000 5799
4. The name and address of the current registered agent and office:
Roger Woodruff 121 N. Osceola Avenue PAR S
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable) 10735 Marianne Lane 1202 Port Richey Fl 34654
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. (Signature of an officer, chairman or vice chairman of the board) (Printed or typed name and title)
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.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

DIVISION OF CORPORATIONS

CR2E045(9/00)

P.O. Box 6327

TALLAHASSEE, FL 32314