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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJE	CT: Rosetta Villas Homeowners As: (Name of Corp	sociation, Inc.
DOCU	MENT NUMBER: N96000000206	
The enc	closed Statement of Change of Registered Office/A	agent and fee are submitted for filing.
Please r	eturn all correspondence concerning this matter to	the following:
	Robert L. Ta (Name of Conta	aylor, Esq.
	(Name of Conta	ct Person)
	Taylor & C	arls, P.A.
	(Firm/Com	pany)
	150 N. Westr	
	(Addres	s)
	Altamonte Spr (City/State and	ings, FL 32714 Zip Code)
For furt	her information concerning this matter, please cal	l:
••••	Robert L. Taylor, Esq. (Name of Contact Person)	at (407) 660-1040 (Area Code & Daytime Telephone Number)
Enclose	ed is a \$35.00 check made payable to the Departme	ent of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta inge is submitted for a corporation organized under the laws of the State of Flo or to change its registered office or registered agent, or both, in the State of Flor	<u>orida</u>	is	-
	the corporation: Rosetta Villas Homeowners Association, Inc. office address: 5632 MARIWOOD DR., ORLANDO FL 32810			
3. The mailing a	ddress (if different): P.O. Box 608934, Orlando, FL 32860			
4. Date of incorp	poration/qualification: 01/11/1996 Document number: N960000	00206	;	
	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	the		
	Harry W. Carls, Esq.			
	850 Concourse Parkway, S, Suite 105			
	Maitland, FL 32751			
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	SECRE1	09 JAN	HEROPAN V-S
	Taylor & Carls, P.A.	ARY	26	PARTER
	150 N. Westmonte Drive (P.O. Box NOT acceptable)	T OF	A	
	Altamonte Springs, FL 32714	au î AIS	H: 0	U
The street addre	ess of its registered office and the street address of the business office of its	in register	ப் ed age	nt,
Such change wa	as authorized by resolution duly adopted by its board of directors or by an one board, or the corporation has been notified in writing of the change.	fficer so)	\ \
Ne	Gersekah YEN/ ure of an other or typed name and title (Printed or typed name and title	Pre		
I frouthou acreso	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and computed I am familiar with and accept the obligation of my position as registered in filed merely to reflect a change in the registered office address, I hereby is seen weighted in writing of this change.	lete per agent. confirm	forma Or, if i n that	nce this the
(Si	gnature of Registered Agent) (Date)			– .
Kobert	Typed or Printed Name)			

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