## N9600000290

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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: HUNTINGTON NOIGHBORHOOD VASSOCIATION, (Name of corporation)  DOCUMENT NUMBER: N9608000298
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LAWrence W Sheeler (Name of person)
Tean First Mandoement, INC (Name of firm/company)
1813 N. Dean ROAD # 103
ORLAWOO FC 32817 (City/state and zip code)
For further information concerning this matter, please call:
LAWrence M. Sheeler at (407) 282-9988 × 102 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

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

this statement of change is submitted for a corporation organized under the laws of the State of  FC in order to change its registered office or registered agent, or both, in the State of Florida.  1. The name of the corporation: HUNTINGTON NEIGH BOR HOO ASSOCIATION,  2. The principal office address: ZIBO W SR Y3Y + SOO  LONG WOOD, FC 32779-SOYY  3. The mailing address (if different):  4. Date of incorporation/qualification: O//17/1996 Document number: N960000290  5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
of Florida.  1. The name of the corporation: HUNTINGTON NEIGHBOR #600 ASSOCIATION,  2. The principal office address: 2180 W SR 434 + 5000  LONG WOOD, FC 32779-5044  3. The mailing address (if different):  4. Date of incorporation/qualification: 01/17/1996 Document number: 19600000290  5. The name and street address of the current registered agent and registered office on file with the
1. The name of the corporation: HUNTIWGTON NEIGH BOR # 500 HSSOCIATION;  2. The principal office address: 2180 W SR 434 + 5000  LONG WOOD, FC 32779-5044  3. The mailing address (if different):  4. Date of incorporation/qualification: 01/17/1996 Document number: N9600000290  5. The name and street address of the current registered agent and registered office on file with the
2. The principal office address: 2180 W SR 434 + 5000  LONG WDOD, FC 3777-5044  3. The mailing address (if different):  4. Date of incorporation/qualification: 01/17/1996 Document number: N9600000290  5. The name and street address of the current registered agent and registered office on file with the
LONG WDD, FC 3777-5044  3. The mailing address (if different):  4. Date of incorporation/qualification: 01/17/1996 Document number: N960000290  5. The name and street address of the current registered agent and registered office on file with the
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HART, JAMES W JR. SENTRY MANAGEMENT, IVC
2180 W SR 434, STE. 5000
Longwood, FC 32779
6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed): Tenn First MANAGE MOUT INC
1813 N. Deaw Rot H 103  (P.O. Box or personal mailbox NOT acceptable)
ORLAWDO, FG 32817
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, chairman or vice chairman of the board)  (EQNARD A. Hame:  (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.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:  LA Wence M. Sheelen  (Typed or Printed Name)  (Capacity)
* * * FIT INC PEF, 925 00 * * *
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  DIVISION OF CORPORATIONS P.O. BOX 6327 TAILAHASSEE EL 32314