N9600001832

(Re	equestor's Name)				
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PICK-UP	☐ WAIT	MAIL			
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08/09/10--01021--012 **35.00



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COVER LETTER

TO:	O: Amendment Section Division of Corporations						
SUBJECT: Valrico_Forest homeowners Association, Inc. Name of Corporation							
DÓĆ	UMENT N	UMBER: N96	000001832				
The e	nclosed Star	tement of Change of Registered Offic	ce/Agent and fee are submitted	I for filing.			
Please	return all o	correspondence concerning this matte	er to the following:				
	Name of Contact Person						
	Communities of America, Inc.						
			ompany				
		PO Bo	ox 2608				
		Ad	dress				
		Valrico,	FI 33595				
		City/State a	ind Zip Code				
		manager@commur	nitiesofamerica.com				
	E-mail address: (to be used for future annual report notification)						
For fi	orther inform	nation concerning this matter, please	call:				
		Richard Pitrowski	at (813)	685-6473			
	N	ame of Contact Person	Area Code & Daytime	Telephone Number			
Enclo	sed is a \$35	.00 check made payable to the Depa	rtment of State.				
		Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Secti Division of Corp Clifton Building	orations			
		Tallahassee, FL 32314	2661 Executive C Tallahassee, FL 3				

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

	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organi	•				
	r to change its registered office or register					
1. The name of t	he corporation: Valrico Forest Ho	meowners Association	n _{, Inc.}			
2. The principal		· · · · · · · · · · · · · · · · · · ·				
	ield Dr Suite 129, Brandon, Fl 33					
	ddress (if different): c/o Communities 2608 Valrico, Fl 33595	of America				
4. Date of incorp	poration/qualification: 3/29/1996	Document number:	N96000001832			
	street address of the current registered ag tment of State: (If resigned, enter resigned		e with the			
	Tracy, Deborah R	·				
	10853 Park Drive		75 75			
	Riverview, FI 33569		FIL 2018 AUG TAELAHT			
6. The name and street address of the new registered agent (if changed) and /or registered office						
	Communities of America					
Communities of America 1463 Oakfield Dr Suite 129						
•	P.O. Box NOT acceptable					
	Brandon, Fl 33511					
The street address changed will	ess of its registered office and the street a be identical.	address of the business office	of its registered agent.			
Such change wa authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been no	by its board of directors or b ified in writing of the change	y an officer so			
Signatu	re of an officer or director	RON RUSSELL Printed or typed name	and title			
I further agree of my duties, and document is bei	the appointment as registered agent and to comply with the provisions of all statu d I am familiar with and accept the obli- ng filed merely to reflect a change in the s been notified in writing of this change.	l agree to act in this capacity ites relative to the proper and gation of my position as regis registered office uddress, I i	l complete performance stered agent. Or, if this hereby confirm that the			
Sig	nature of Registered Agent	8-4-10 Date				
If signing on be	half of an entity:		MECEIVEN			
Comm	unities of America		AUG 0 3 2010			
	* * * FILING FE	E: \$35.00 * * *	BY:			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)