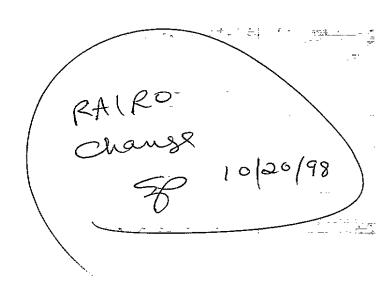
N97000002724

ASHTON OAKS CONDO ASSOC. 1044 CASTELLO DR. SUITE 206 NAPLES, FL 34103



900002668779--9 -10/21/38--01001--004 *****35.00 ******35.00



Florida Department of State, Sandra B. Mortham, Secretary of State

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 Florida 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 is: ASHTON OAKS AT STONEBRIDGE CONDOMINIUM ASSOCIATION, INC.			
		2. The mailing address of the corporation is: <u>Clo Southwest Property</u>	
		1044 Casteris Drive, Suite He ade, Naples, Fi 3403-	NO700000704
		3. Date of incorporation/qualification: 5/14/97 Document nu	mber: N97000002724
4. The name and address of the current registered agent and office:			
John R. Peshkin c/o Taylor Woodrow Communities 7120 S. Beneva Road Sarasota Fl 34238			
Sarasota, FL 34238 5. The name and address of the new registered agent and office: (P. O. Box N	Int Accentable)		
	S. S.		
LISA H. Parnett, Esq.	lot Acceptable) 98 0CT 20		
Tresser, Vabrant Vape Chia.	ः हा		
4001 Tamienio Trail N., Sule 370, No.	pla, Fr. 34103 9 8 8 8		
The street address of its registered office and the street address of the busingent, as changed, will be identical.	ness office of its regimered		
Such change was authorized by resolution duly adopted by its board of disauthorized by the board.	rectors or by an officer so		
MANA Driver	9/17/98		
(Signature of an officer, chairman or vice chairman of the board)	(Date)		
ARTHUR S. FURIAL Press dut	-		
(Printed or typed name and title)	(Date)		
Having been named as registered agent and to accept service of process corporation, I hereby accept the appointment as registered agent and aging in the provisions of all statutes relative to the performance of my duties, and I am familiar with and accept the obligation registered agent.	ree to act in this capacity. c proper and complete		
(Signature of Registered Agent)	9/17/98		
(Signature of Registered Agent)	(Date)		
If signing on behalf of an entity:			
Traiser, Koloza + Volpe, Chtd. Associate. (Typed or Printed Name)	Attorney/member of the firm		
CR2F045(4/95)	FILING REE: \$35.00		