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* Board Certified Real Estate Attorney

** Of Counsel

May 10, 1999 Via: U.S. Mail

Division of Corporations Secretary of State P.O. Box 6327 Tallahassee, FL 32314

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RE: COUNTRY PALMS HOMEOWNERS' ASSOCIATION, INC.

Gentlemen:

Enclosed please find the executed original Statement of Change of Registrered Office and Registered Agent for the above-captioned corporation. I have also enclosed a check in the amount of \$35.00 for the filing fees.

Please process this at your earliest convenience. Thank you very much.

Sincerely,

Jerome S. Levi For the Firm

JSL/lcb

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SECRETARY OF STATE
SECRETARY OF LORID

R.A. Charge LFJ 5-20-99

Charter No.	
Date Filed: _	

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.1508. Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

1. The name of the corporation is:

Country Palms Homeowners' Association, Inc.

2. The name and address of its present registered agent is:

Robert L. Koontz 378 Golden Gate, Suite 5 Sarasota, Florida 34236

3. The name and street address to which its registered agent is to be changed is:

Thomas F. Sanbörn 3609 77th Terrace East Sarasota, FL 34243

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 SECRETARSE OF STATE
- 4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.
- 5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

Date: 5/6/99 Thomas F. Sanborn, President

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE. 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 UNDER SECTION 607.0505, FLORIDA STATUTES.

Date: 5/10/99

Thomas F. Sanborn, Registered Agent