N97000005436

(Red	(uestor's Name)	
(Add	iress)	
•	•	
	lress)	
(Auu	11622)	
(City	/State/Zip/Phone	e #)
	_	-
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	ne)
(y	
(Doc	ument Number)	
Certified Copies	Pertified Copies Certificates of Status	
0 11 11 11 11		
Special Instructions to F	iling Oπicer:	
]		
		-
		1
]		}
<u> </u>		

Office Use Only



300057188193

07/18/05--01011--025 **35.00

SECRETARY OF STATE

RAchange

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, this
statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Florida Association Management, the
2. The principal office address: 3383 W. Vine Street, Suite 307
Kissimmee, FL 34741
3. The mailing address (if different): PO. BOX 421430
KISSIMMEC, FL 34742-1430
4. Date of incorporation/qualification: 9/24/1917 Document number: N970000 5436
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
DAF Management LLC
3383 W. Vine Street Suite 3079
3505 W. VIIC DICCI, MIRCHOS
6. The name and street address of the new registered agent (if changed) and /or registered office ?
(if changed): Florida Association Management The
336/ W. Vine St, Suite 208
Kissimmee, FL 34741
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.
Steven Di La Grande Precioba +
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:
Tollie Boy (Typed or Printed Name)

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

COVER LETTER

TO: Amendment Section Division of Corporations	• • .
SUBJECT: Ruby Lake Homeowner's Association, Inc. (Name of corporation)	
DOCUMENT NUMBER: N9700005436	. " .2
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:	
Dollie Boyd (Name of contact person)	1.2754 (1)
Florida Association Management, Irc	and the state of t
P.D. BOX 42/430 (Address)	, a se
Kissimmee FL 34742-1430 (City/state/and zip code)	🔻
For further information concerning this matter, please call:	
Name of confact person) at (407) 908-8985 (Area code & daytime telephone number)	gillion see o 197

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399