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COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: Egret's Landing of Lake Mary Homeowners' Association, Inc. Name of Corporation DOCUMENT NUMBER: <u>N9</u>8000000777 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: Jessica Garza, LCAM Name of Contact Person Premiere Association Management of Central Florida, Inc. Firm/Company 725 Primera Boulevard, Suite 115 Address Lake Mary, FL 32746 City/State and Zip Code jessicagarza@premiermgmtcfl.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jessica Garza, LCAM Name of Contact Person 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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
•	inge is submitted for a corporation organized under the laws of the State of Florida
in orde	r to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: Egret's Landing of Lake Mary Homeowners' Association, Inc.
	office address: c/o Premiere Association Management of Central Florida, Inc.
725 Prim	era Boulevard, Suite 115, Lake Mary, FL 32746
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 12/14/1998 Document number: N9800000777
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Premiere Association Management of Central Florida, Inc.
	725 Primera Boulevard, Suite 115
	Lake Mary, FL 32746
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office Taylor & Carls, P.A.
	Taylor & Carls, P.A.
	150 N. Westmonte Drive
	P.O. Box NOT acceptable
	Altamonte Springs, FL 32714
The street addre as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Signatui	e of an offisepor alfector Printed or typed name and true
I hereby accept if further agree to berformance of it agent. Or, if this hereby confirm if	the appointment as registered agent and agree to act in this capacity. It is comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered a document is being filed merely to reflect a change in the registered office address, I hat the corporation has been notified in writing of this change.
Havey Sign	S-21-13 attire of Registered Agent Date
U If signing on beh	alf of an entity:
Harry W.	Carls and or Printed Name

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