

U9800000/336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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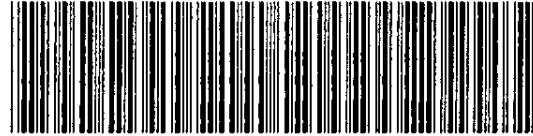
(Business Entity Name)

(Document Number)

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3/20/11  
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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: WILLOW POINTE/PASCO HOMEOWNERS' ASSOCIATION  
Name of Corporation

DOCUMENT NUMBER: N98000001336

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:

Meredith Tunnell  
Name of Contact Person

RealManage  
Firm/Company

16200 Addison Rd Ste 150  
Address

Addison, TX 75001  
City/State and Zip Code

transition@realmanage.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Meredith Tunnell at ( 866 ) 473-2573  
Name of Contact Person Area Code & Daytime Telephone Number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 16, 2011

MEREDITH TUNNELL  
16200 ADDISON RD STE 150  
ADDISON, TX 75001

SUBJECT: WILLOW POINTE/PASCO HOMEOWNERS' ASSOCIATION, INC.  
Ref. Number: N98000001336

We have received your document for WILLOW POINTE/PASCO HOMEOWNERS' ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 311A00006440

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: WILLOW POINTE/PASCO HOMEOWNERS' ASSOCIATION
2. The principal office address: 4902 Eisenhower Blvd., Suite 216  
Tampa, FL 33634
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 3/5/1998 Document number: N98000001336

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

WESTERMAN, MARIELLE ESQ, WESTERMAN WHITE, P.A.  
146 2ND STREET, NORTH SUITE 208  
ST. PETERSBURG FL 33701 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

RealManage, LLC

4902 Eisenhower Blvd., Suite 216

P.O. Box NOT acceptable

Tampa, FL 33634

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

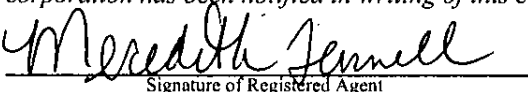
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

  
Signature of an officer or director

Miguel Martinez Jr, President  
Printed or typed name and title

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

3/8/2011  
Date

If signing on behalf of an entity:

Meredith Tunnell, Director of Transition, RealManage  
Typed or Printed Name

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

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