N9800000369/

| (Requ | estor's Name) | |
|------------------------------|-----------------|-------------|
| (Addre | ess) | |
| (Addre | ess) | |
| (City/S | State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Busir | ness Entity Nar | me) |
| (Docu | ment Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Fili | ng Officer: | |
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Office Use Only



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TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: TOWN PARK HOMEOWNERS ASSOCIATION, NO. (Name of corporation) |
| DOCUMENT NUMBER: <u>N980000 369/</u> |
| 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: |
| JAMES R. FIShER (Name of person) |
| TOWN PARK HOA, INC (Name of firm/company) |
| 1221 DUNCAWTON AVE., STE Z (Address) |
| PORT DRANGE, FL 32/29 (City/state and zip code) |
| For further information concerning this matter, please call: |
| TAMES R. FISHER at (386) 299 -2718 (Name of 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 409 E. Gaines Street Tallahassee, FL 32399

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: Town HARK HomeownERS ASSOCIATION, INC. | |
| 2. The principal office address: 1221 DUNKAWTON AVENUE, 5TE Z | |
| PORT DRANGE, FLORIDA 32129 | |
| 3. The mailing address (if different): P.O. Box 0.396 | |
| DRMOND BEACH, FLORIDA 32176 | • |
| 4. Date of incorporation/qualification: /958 Document number: N9800003 | ,9 |
| 5. The name and street address of the current registered agent and registered office on file with the | |
| Florida Department of State: | |
| JERRY JOHNSON, JR | Π |
| 1221 DUNKUTION AVE | 7 |
| PORT ORANGE, FL 32127 | 7 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if- | ` |
| channels. | , |
| JAMES R. FISHER | , |
| 1221 DUNCAWTON AVE. STE 2 (P.O. Box or personal mailton NOT acceptable) | |
| PORT ORANGE, FL 32129 | |
| | |
| 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, phairman or vice chairman of the board) JERRY S. Johnson DST (Frinted 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 | |
| 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. | |
| July 31, 2003 | |
| (Signature of Registered Agent) (Date) | |
| If signing on behalf of an entity: | |
| (Typed or Printed Name) (Capacity) | |

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