2005 NOT-FOR-PROFIT CORPORATION DOCUMENT # N98000006306



FILED May 03, 2005 8:00 am Secretary of State

1. Entity Name THE OAKS OF SUNTREE CONDOMINIUM ASSOCIATION, INC.								05-03-2005	90086 02	8 ****6	51.25	
Principal Place of Business Mailing Address												
7430 SPYGLASS HILL RD P.O			P.O.). BOX 410339 LBOURN, FL 32941-0339					W10			
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Principal Ptace of Business 3.			3. Mai	Maifing Address				i i i i i i i i i i i i i i i i i i i				
Suite, Apt. #. etc.			Suite, Apt. #, etc.				02092005	Chg-NP	CR2E037	(10/03)		
City & State		Cit	City & State				4. FEI Number 59-35579	911		<u> </u>	pplied For ot Applicable	
Zip Country		Zip)	ntry					8.75 Add	ditional		
6 Name and Address of Current Revister			ed Agent				7 Name and A	ddraes of New E		ee Require		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name						
SPACE COAST PROPERTY MANAGEMENT 1617 COOLING AVENUE MELBOURNE, FL 32935				Street Address			ddress (i	(P.O. Box Number is Not Acceptable)				
MELBOUR	INE, FL 3	2935			İ			· · · · · · · · · · · · · · · · · · 			··· ,	
				City						FL	Zip Cod	je
		y submits this statement	for the purp	ose of changing its	registere	d office o	register	ed agent, or both.	in the State of Flo	orida. I am fa	miliar with,	, and accept
the obligat	tions of regist	lered agent.										
SIGNATURE												
SIGNATURE:	Signature, typed	or printed name of requisioned ag-	ent and title if app	oficable. (NOTE	: Registered	Agent signs:	ure required	when remstating)		DATE		
	_	e is \$61.25 lay 1, 2005		9. Election Can Trust Fund C	npaign Fi	inancing		\$5.00 May Be Added to Fees		iake check ida Departi		
10.	Due by N		DIRECTORS	9. Election Can Trust Fund C	npaign Fi	inancing		\$5.00 May Be Added to Fees ADDITIONS/CHAN	Flor	lake check ida Departi	nent of S	N 10
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I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Regina G. Vaudo 259-9562 Daytime Phone #