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SECRETARY OF STATE OF STATE OF CORPORATIONS OF CORPORATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations	_	
SUBJECT: MILLHOPPER FOREST HOMEOWNER'S AS (Name of Corpo	SOCIATION, INC.	
DOCUMENT NUMBER: N99000000928		
The enclosed Statement of Change of Registered Office/Ag	gent and fee are submitted for filing.	
Please return all correspondence concerning this matter to t	the following:	
WESTON BAUR/ED BAUR MANA	GEMENT INC.	
(Name of Contact	t Person)	
DBA FLORIDA COMMUNITY MANAGEMENT		
(Firm/Compa	any)	
1731 NW 6TH STREET STE.A (Address		
(,	
GAINESVILLE FL 32609		
(City/State and Z	ip Code)	
For further information concerning this matter, please call:		
WESTON BAUR		
(Name of Contact Person)	t (352) 224-1503 (Area Code & Daytime Telephone Number)	
, ,	(
Enclosed is a \$35.00 check made payable to the Department	at of State.	
Mailing Address:	Street Address:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
•	Tallahassee, FL 32301	

TO:

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 ofFLORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: MILLHOPPER FOREST HOMEOWNER'S ASSOCATATION, INC.
2. The principal office address: 1731 NW 6TH STREET STE A
GAINESVILLE FL 32609
3. The mailing address (if different): PO BOX 14506
GAINESVILLE FL 32604
4. Date of incorporation/qualification: 2/10/99 Document number: N99000000928
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
HAUFLER, EUGENE
1731 NW 6TH ST STE. A
GAINESVILLE FL 32609
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
WESTON BAUR/ED BAUR MANAGEMENT INC.
DBA FLORIDA COMMUNITY MANAGEMENT
1731 NW 6TH STREET STE.A (P.O. Box NOT acceptable)
GAINESVILLE FL 32609

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.
(Printed or typed name and fitte)
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.
Wat pr-
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(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