



**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, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : Robinwood Homeowners Association, Inc
  
2. The mailing address of the corporation : 3527 Palm Harbor Blvd.  
Palm Harbor FL 34683
  
3. Date of incorporation/qualification: 02/12/1999 Document number: N 99 000 000 941
  
4. The name and address of the current registered agent and registered office:  
Hansen, Jack  
46 Melrose Mgmt Group  
3527 Palm Harbor  
Palm Harbor FL 34683
  
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
Jeffrey Ulm  
46 Goldstar Management Co.  
2435 US 19 # 270  
Holiday FL 34691

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 TALLAHASSEE, FLORIDA

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.

Mary Lippitt President HOA 7/18/06  
 (Signature of an officer, chairman or vice chairman of the board) (Date)

MARY LIPPITT, President HOA Robinwood  
 (Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

[Signature] 7/18/06  
 (Signature of Registered Agent) (Date)

If signing on behalf of an entity:  
Jeffrey Ulm Agent / Property Manager  
 (Typed or Printed Name) (Capacity)

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