## N9900001928

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EXAMPLINATER

## **COVER LETTER**

	Amendment Section Division of Corporations	
SUBJEC	T: Fairmont at Regency Lakes Homeowners'	Association, Inc.
	Name of Co	nporation
DOCUM	ENT NUMBER: N99000001928	
The enclo	osed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please ret	turn all correspondence concerning this matter	to the following:
	Donald R. Walters	
	Name of Con	tact Person
	Donald R. Walters, P.A. Firm/Co	mpany
	7401 Wiles Road, Suite 202	
	Addr	ress
	Coral Springs, FL 33067	
	City/State an	d Zip Code
	dwalters@dwalterslaw.com  E-mail address: (to be used for fu	uture annual report notification)
	E-man address. (to be used for it	iture aimuai report nonneamon)
For furthe	er information concerning this matter, please of	call:
Donale	Name of Contact Person	at ( 954 ) 840-0494  Area Code & Daytime Telephone Number
	Name of Contact I classic	Area code & Bayanie Pelephone Namoer
Enclosed	is a \$35.00 check made payable to the Depart	ment of State.
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporations	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 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: Fairmont at Regency Lakes Homeowners' Association, Inc.	
2. The principal office address: 1215 E. Hillsboro Boulevard	
Deerfield Beach, FL 33441	
3. The mailing address (if different): Same	
4. Date of incorporation/qualification: 02/26/1996 Document number: NST DOCCO 192	8
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)	
Donald R. Walters, c/o Johnson & Walters P.A.	
1401 N. University Drive, Suite 301	υ) (*) (*)
Coral Springs, FL 33071	三三
1401 N. University Drive, Suite 301  Coral Springs, FL 33071  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	OF STATIONS
Company Donald R. Walters   Donald R. Walters   Donald R. Walters	TION:
7401 Wiles Road, Suite 202	
P.O. Box NOT acceptable	
Coral Springs, FL 33067	
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 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 dorporation has been notified in writing of this change.	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Donald R. Walters	
Typed or Printed Name	

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