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COVER LETTER

TO: Registration Section Division of Corporations				
2.773.01. 01. Co.potanion				
SUBJECT: Eden on the Bay Homeowners' Association, Inc.				
(Name of Limite	d Liability Company)			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this n	natter to the following:			
Christina Harris Schwinn, Esq.				
(Name of Person)				
Pavese Law Firm				
(Firm/Company)	· ····································			
1833 Hendry				
(Address)				
Fort Myers, FL 33901				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Christina Harris Schwinn, Esq. at (239) 336-6228			
(Name of Person)	(Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following am	ount:			
✓ \$25 Filing Fee	\$55 Filing Fee & Certified Copy			

INHS18 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company 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 limited liability company is: Eden on the	he Bay Homeowners' Asso	ociation, Inc	<u>. </u>	
2. The mailing address of the limited liability company is:	10961 Bonita Beach Ro	oad	<u></u> ,	
Bonita Beach, Florida 34145			,	
09/23/99	N99000005681	J7 MA		
3. Date of filing/registration in Florida	4. Document number	HASE ATA		
5. The name of the registered agent and the registered office Florida Department of State:	e address as shown on the	records of	he 🗂	
Park Avenue Property Mart LLC				
Name 10961 Bonita Beach Rd.		TATE ORIDA	<u>{</u>	
Address				
Bonita Springs, FL 34135 City, State and 2	Zip			
6. The name and address of the new registered agent and/or	office:			
Christina Harris Schwinn, Esq.				
Name 1933 Handri				
1833 Hendry Florida street address (P.O. Box NOT acceptable)				
	•			
Fort Myers, FL 339				
City, State and Zi	p			
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.	orida street address of the cal. Or, in the case of a Fl was/were authorized by a wise provided in the articl	registered o lorida limite n affirmativ	office ed e vote	
(Signature of a member or authorized representative of a member)				
Ann Frees, President (Printed or typed name of signee)	-			
I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, Thereby confirm that the limited liability company (Signature of Registered Agent)	ree to act in this capacity per and complete perform ition as registered agent a ely reflect a change in the has been notified in writin	. I further ance of my is provided registered ng of this ch	agree to duties, for in office lange.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00