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Office Use Only



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## **COVER LETTER**

TO:	: Amendment Section Division of Corporations					
SUBJECT: Westbrook Estates Homeowners' Association (formerly Saddlebrook Village West))  (Name of corporation)						
DOCU	CUMENT NUMBER: N99000005895					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Susan Thomas						
	(Name of contact	person)				
	Rampart Properties, Inc. (Firm/Company)					
10012 N.Dale Mabry Highway, Suite 223 (Address)						
	Tampa, FL 33618					
	(City/state and zip code)					
For fu	urther information concerning this matter, please call:					
Susan	nn Thomas a	(Area code & daytime telephone number)				
	(Name of contact person)	(Area code & daytime telephone number)				
Enclos	osed is a \$35.00 check made payable to the Departmen	at of State.				
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399				

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	provisions of sections 607.0502, 617.050 ange is submitted for a corporation organ er to change its registered office or regist	nized under the laws of the Sta	ate of Florida		
1. The name of	the corporation: Westbrook Estates Hon	neowners' Association, Inc.			
	2. The principal office address: 10012 N. Dale Mabry Highway, Ste. 223				
	Tampa, FL 33618				
3. The mailing	address (if different):				
4. Date of incor	poration/qualification: October 4, 1999	Document number: NS	9000005895		
	d street address of the current registered a rtment of State:	igent and registered office on	file with the AS 24		
	Jack Hanson/Melrose Management G	roup Inc.	SEE		
	PO Box 531010, 1416 Concord St. El		Post -		
	Orlando, FL 32853-1010		DAIE A		
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or registe	red office		
	Brian K. Smith				
	10012 N. Dale Ma	abry Highway, Ste. 223			
	(P.O. Box NOT acceptable	)			
	Tampa, FL 33618	3			
The street addr as changed wil	ess of its registered office and the street be identical.	address of the business office	ce of its registered agent,		
Such change wauthorized by t	as authorized by resolution duly adopte he board, or the corporation has been no	d by its board of directors or otified in writing of the chan	r by an officer so ge.		
(Signat	an Thomas CMCA use of an officer of director)	Swan /	humas cmca		
I hereby accept I further agree of my duties, at document is be corporation ha	t the appointment as registered agent ar to comply with the provisions of all stat nd I am familiar with and accept the obl ing filed merely to reflect a change in th s been notified in writing of this change	nd agree to act in this capact tutes relative to the proper a ligation of my position as req ie registered office address, t.	ity. nd complete performance gistered agent. Or, if this I hereby confirm that the		
3	gnature of Registered Agent)	March (Date)	10,2005		
(Si	gnature of Registered Agent)	(Date)			
	ehalf of an entity:				
	7 Thornes Typed or Printed Name)				
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\* \* \* FILING FEE: \$35.00 \* \* \*