(Requestor's Name)				
(Address)				
,				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: Waters Edge Commercial Manage (Name of Co	ement Co.
DOCU	MENT NUMBER: P06000114545	
The en	closed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter t	o the following:
	Patricia I. Lavigne (Name of Cont	act Person)
	Marlowe McNabb & Stayton, P./	
	1560 West Cleveland Street (Addre	ess)
	Tampa, FL 33606-1807	
	(City/State and	Zip Code)
For fur	ther information concerning this matter, please ca	11:
Patrici	a I. Lavigne (Name of Contact Person)	at (813) 251-3013 (Area Code & Daytime Telephone Number)
Enclose	ed is a \$35.00 check made payable to the Departm	ent of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nange is submitted for a corporation organized under the laws of the State of Florida	
	der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: Waters Edge Commercial Management Co.	
2. The principal	al office address: 550 N. Reo Street, Sulte 300, Tampa, FL 33609	P-15004-0-4-0-
3. The mailing a	address (if different):	
4. Date of incor	rporation/qualification: 09/05/2006 Document number: P06000114545	
	nd street address of the current registered agent and registered office on file with the artment of State:	
	Skip Drish	
	550 N. Reo Street, Suite 300	
	Tampa, FL 33609	-
6. The name and (if changed):	and the second s	1
	Stephen D. Marlowe, Marlowe McNabb & Stayton, P.A.	•
	1560 West Cleveland St.	
	(P.O. Box NOT acceptable)	
	Tampa, FL 33606-1807	
The street address changed will	ress of its registered office and the street address of the business office of its registered agent, I be identical.	
Such change wa authorized by the	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Sanati	Skip Drish, President (Printed or typed name and title)	
•	t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this sing filed merely to reflect a change in the registered office address, I hereby confirm that the is been notified in writing of this change.	
	May (, 2008 Signature of Registered Agent) (Date)	
f signing on be	ehalf of an entity:	
Stephen D. M		
(1	Typed or Printed Name)	

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