Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0380

From:

: TAYLOR WOODROW COMMUNITIES Account Name

Account Number : I20000000218 Phone : (727)563-9882 Fax Number : (727)563-9674

REGISTERED AGENT CHANGE

TWKC, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35,00

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Corporate Filing

Public Access Help

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

change is subm	provisions of sections 607.0502, 61 uitted for a corporation organized un gistered office or registered agent, o	ider the laws		this statement of in order
1. The name of	the corporation: TWKC, Inc.			
2. The principal	office address: 8430 Enterprise (Circle, Suite	100, Bradenton, FL 34202-4108	
3. The mailing	address (if different): 8430 Enterp	rise Circle, S	Suite 100, Bradenton, FL 34202-4	108
4. Date of incom	rporation/qualification: 09/13/94	D	ocument number; P9400067591	
	nd street address of the current registratement of State:	ered agent an	d registered office on file with the	FS 03
	Keith E. Bass	· · · · · · · · · · · · · · · · · · ·		
	8480 Enterprise Circle, Suite 1	00, Bradente	on, FL 34202-4108	O3 HON 19 PH 3: CO
6. The name an (if changed):	ad street address of the new registere	d agent (if ch	anged) and /or registered office	STATE A
	Marc I. Spencer	 _		• - ·
	877 Executive Center Drive W., (P.O. Box or p.	, Suite 205, i		- .
The street addr	ress of its registered office and the	street address	s of the business office of its registe	ered agent, as
Such change with board, or the	as authorized by resolution duly and corporation has been notified in	dopted by its writing of th	board of directors or by an officer e change.	so authorized by
	Signature of an officer of directors		C. Alexander Bratt, Vice Pres	ident
I hereby accep I further agree duties, and I as being filed mes been notified is	of the appointment as registered ago to comply with the provisions of a m familiar with and accept the obli- rely to reflect a change in the regis n writing of this change.	ent and agree ll statutes rei igation of my tered office a		
Mus			11:13:03	·
	(Signature of Registered Agent)		(Date)	
r signing on b	chalf of an entity:			
	(Typed or Printed Name)		(Capacity)	

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