N05000012108

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(Cit	ry/State/Zip/Phone	e #)			
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DATE:

03-13-15

NAME:

MAGNOLIA PLACE TOWNHOMES CONDOMINIUM ASSN, INC.

TYPE OF FILING: CHANGE OF AGENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

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

statement of cha	provisions of sections 607.0502, 617 ange is submitted for a corporation of er to change its registered office or re	rganized under the laws of the Sto	ale of Fio	this rida
I. The name of	the corporation: MAGNOLIA PLAC	CE TOWNHOMES CONDOMI	NIUM ASSOC	HATION, INC.
• •	office address:	FL 32606		
-	address (if different):	Ann Arbor	MI	48104
	N. Main Street, Ste 200 Ann Arbor incorporation/qualification: December 2, 2005 Document number:		N05000012108	
5. The name and	I street address of the current register rtment of State: (If resigned, enter res	ed agent and registered office on	file with the	
	COLLISO	N, HARRY		
	180 S KNOWL	LES AVE STE 3		
	WINTER PAR	RK,, FL 32789		;
6. The name and (if changed):	street address of the new registered National Corporate Ro		red office	15 MAR 13
	155 Office Plaza Drive			4
		NOT acceptable		9.
	Tallahassee, FL 323	801	····	ORIDA : 58
The street addre	ess of its registered office and the str be identical.	eet address of the business office	e of its registe	red agent,
Such change wa	s authorized by resolution duly adopte board, or the corporation has been	pted by its board of directors or to notified in writing of the chang	oy an officer s	0
W/acco	re of an officer or director	Maureen O Con	nor. Di I	ector
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent to comply with the provisions of all s my duties, and I am familiar with an is document is being filed merely to t that the corporation has been notific	t and agree to act in this capacity statutes relative to the proper an ad accept the obligation of my po reflect a change in the registered ed in writing of this change.	y, d complete osition as regis d office addres	stered s, I
	Last	03/13/20	15	
	half of an entity:	. Date		

Mark Thomas, Assistant Secretary

Typed or Printed Name

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