

NO5000012108

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800212582098

09/28/11--01037--003 \*\*35.00

FILED

2011 SEP 28 PM 3:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A.

TBrown 9-29-11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Magnolia Place Townhomes Condominium Association  
Name of Corporation

**DOCUMENT NUMBER:** N05000012108

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:

ELISABETH ALONSO

Name of Contact Person

MCKINLEY INC

Firm/Company

320 N MAIN STREET SUITE 200

Address

ANN ARBOR, MI 48104

City/State and Zip Code

ealonso@mckinley.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELISABETH ALONSO

Name of Contact Person

at ( 734 ) 769-8520, X194  
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department 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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Magnolia Place Townhomes Condominium Association Inc.
2. The principal office address: 5075 NW 43RD AVENUE  
GAINESVILLE, FL 32606
3. The mailing address (if different): 320 N MAIN STREET SUITE 200  
ANN ARBOR, MI 48104
4. Date of incorporation/qualification: 12/2/2005 Document number: N05000012108
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

KATHY HENSLEY

4401 S KIRKMAN ROAD

ORLANDO, FL 32811

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

HARRY COLLISON

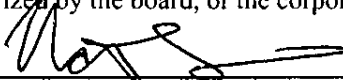
180 S KNOWLES AVENUE SUITE 3

P.O. Box NOT acceptable

WINTER PARK, FL 32789

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

NATHAN LEWIS  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

8/1/2011  
Date

If signing on behalf of an entity:

Harry Collison  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)

FILED  
2011 SEP 28 PM 3:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA