

9/19/2013  
0018216

Commonwealth of Kentucky  
Alison Lundergan Grimes, Secretary of State

N601  
0018216  
Alison Lundergan Grimes  
KY Secretary of State  
Received and Filed  
9/19/2013 11:36:48 AM  
Fee receipt: \$10.00

Alison Lundergan Grimes  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

Statement of Change of  
Registered Office, Registered  
Agent, or Both

RAC

Pursuant to the provisions of KRS chapters 271B, 273, 275, or 362, the undersigned hereby applies to change the registered office, registered agent, or both on behalf of

**FOUR SEASONS TOWN HOUSE RESIDENTS ASSOCIATION, INC.**

which is organized in the state of Kentucky, and for that purpose submits the following statements:

**1. Name of current registered agent**

JOHN G. HABENSTEIN SR.

**2. Registered agent is hereby changed to:**

JANICE L WADE

**3. Address of current registered office**

3109 SUMMERFIELD DR  
LOUISVILLE, KY 40220

**4. Registered office is hereby changed to:**

3009 SUMMERFIELD DR  
LOUISVILLE, KY 40220

**5. Signature of officer or chairman of the board**

Janice L Wade, Treasurer  
Signature and Title  
Type or print name and title  
9/19/2013 11:36 AM  
Date

**6. Consent of new agent**

I consent to serve as the new registered agent on behalf of this corporation.  
JANICE L WADE  
Signature and Title  
Type or print name and title