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| PICK-UP | ☐ WAIT | MAIL | | |
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| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to I | Filing Officer: | | | |
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SECRETARY OF STATE
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APPROVED AND FILED

G. Goullions DEC 2 1 2007

COVER LETTER

| Division of Corporations | | |
|-------------------------------------|------------------------------------------|-------------------------------------------------------------|
| SUBJECT: Leisureville Com | nmunity Association | on, Inc. |
| SUBJECT. | (Name of Co | rporation) |
| DOCUMENT NUMBER: 7128 | 363 | |
| The enclosed Statement of Chang | e of Registered Office | Agent and fee are submitted for filing. |
| Please return all correspondence of | concerning this matter | to the following: |
| John C. Ray | son | <u> </u> |
| | (Name of Con | tact Person) |
| Law Offices | of John C. Rayson | |
| | (Firm/Cor | npany) |
| Second Floor | , 2400 E. Oakland | |
| | (Addre | ess) |
| Fort Lauderda | | 17: |
| For further information concerning | (City/State and g this matter, please ca | - |
| John C. Rayson | | at (954) 566-8855 |
| (Name of Contact | Person) | at (954) 566-8855 (Area Code & Daytime Telephone Number) |
| Enclosed is a \$35.00 check made | payable to the Departn | nent of State. |
| Mailing . Amendn | Address: nent Section | Street Address: Amendment Section |
| | of Corporations | Division of Corporations |
| P.O. Box | - | Clifton Building |
| Tallahas | see, FL 32314 | 2661 Executive Center Circle |

Tallahassee, FL 32301

Tallahassee, FL 32314

TO: Amendment Section

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

| statement of ch | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida. | | - | |
|------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-----------------|---------------|
| 1. The name of | the corporation: Leisureville Community Association, Inc. | | | |
| | office address: 2921 W. Golf Blvd., Pompano Beach, FL 33064 | | | |
| 3. The mailing | address (if different): | | | <u>-</u> |
| 4. Date of incor | poration/qualification: 06/01/1967 Document number: 712863 | | | |
| | d street address of the current registered agent and registered office on file with the rtment of State: | | | |
| | Poliakoff, Gary A, J.D. | | | |
| | Becker & Poliakoff, P.A. | | | |
| | 3111 Stirling Road, Fort Lauderdale, FL 33312 | _ 1 | | |
| 6. The name an (if changed): | d street address of the new registered agent (if changed) and /or registered office | SECRETARY OF STATE ALLAHASSEE, FLORIO | 07 DEC 19 | <u> ≅</u> ≥ |
| | John C. Rayson Law Offices of John C. Rayson | EE, FL | AH G: | .m.č |
| | (P.O. Box NOT acceptable) Second Floor, 2400 E. Oakland Park Blvd., Fort Lauderdale, FL 33306 | DRIE DRIE | : သွ | |
| = | ess of its registered office and the street address of the business office of its regis l be identical. as authorized by resolution duly adopted by its board of directors or by an office he board, or the corporation has been notified in writing of the change. | | t, | |
| El wir | ture of an officer of director) Live of an officer of director) Live of an officer of director) Live of an officer of director) | _ | りむ | in the second |
| I further agree of my duties, a document is be | 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 p nd I am familiar with and accept the obligation of my position as registered agen ing filed merely to reflect a change in the registered office address, I hereby conf is been notified in writing of this change. | performan t. Or if th irm that th | ce iis ie | |
| The | C/Layon 12.17-07 | | - | |
| // | ignature of Registered (gent) (Date) chalf of an entity: | | | |
| | • | | | |
| John C. Rays | Typed or Printed Name) | | | |

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

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