7/5800

(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:	7





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SECRETARY OF STATE
ALLAHASSEE, FLORINA

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Palm Bay Towers Condominium Association, Inc. (Name of Corporation)
DOCUMENT NUMBER: 715800
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:
Mara J. Jockers, Esq. (Name of Contact Person)
Blaxberg, Grayson, Kukoff & Strauss, P.A. (Firm/Company)
25 SE 2 Avenue, Suite 730 (Address)
Miami, Florida 33131
(City/State and Zip Code)
For further information concerning this matter, please call:
Mara J. Jockers, Esq. at (305) 381-7979 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (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 Street Address: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

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TO:14412928349

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BU	71
FOR CORPORATIONS	

Pursuant to the provinces of sections 607,0502, 617,0502, 607 1508, or 617,1508, Florida Statines, this statement of change is submitted for a corporation organized under the laws of the State of Florida	
The name of the corporation: Palm Bay Towers Condominium Association, Inc.	_
2. The principal office address: 720 NE 69 Street, Mlami, Florida 33138	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 12/31/1968 Document number: 715800	E
5. The name and street address of the current registered agent and registered office on file with the	
Haber & Ganguzza, LLP	<u>,</u>
1 SE 3 Avenue, Suite 1820	ų T
Miami, Florida 33131	TO:
6. The name and street address of the new registered agent (if changed) and for registered office (if changed):	
Blaxberg, Grayson, Kukoff & Strauss, P.A.	
25 SE 2 Avenue, Suite 730	
(PO. Box NOT exceptable) Miami, Florida 33131	
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.	
Jorge J. Bosch. President	
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. Dr. if this document is being fried mereby to reflect a change in the registered office address, I hereby confirm that the corporation has free notified in writing of this change.	
(Signature of Subsected Agent)	
Usigning on hehalf of an entity:	
. Barry Blaxberg	
* * * 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)