

718703

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

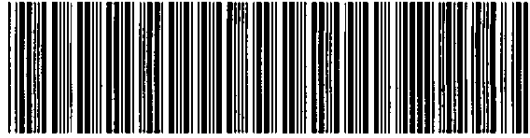
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TB

AUG - 4 2009



July 22, 2009

Brough, Chadrow & Levine, P. A.
Attn: Jannely Arevalo
1900 North commerce Pkwy.
Weston, FL 33326

Re: Condo Assoc. of Lakeside Village

Dear Jannely:

Enclosed is the original Change of Registered Agent signed, along with check #904, for \$35.00. payable to the State of Florida Department for filing. Please have your office sign and send off for recording.

If you should have any further questions and/or concerns please feel free to contact us.

Yours truly,

Q. Kim Le
Accounts Receivable &
Legal Department

Enclosures

6300 Park of Commerce Boulevard, Boca Raton, FL 33487-8229

Main Office: 561-997-4045

Direct Line: 561-989-5027 * Direct Fax: 561-989-5127

kile@primemg.com

www.primemg.com

From:

04/10/2009 08:48

#261 P.002/002

**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: Condominium Association of Lakeside Village, Inc.
2. The principal office address: 6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 6-16-70 Document number: 718703
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Becker & Poliakoff

625 N. FLAGLER DR. 7th FLOOR
West Palm Beach, FL 33401

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

BROUGH, CHADROW & LEVINE, P.A.

1900 NORTH COMMERCE PARKWAY

(P.O. Box NOT acceptable)

WESTON, FL 33326

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.

Robert Howell
(Signature of an officer or director)

ROBERT HOWELL PRES.
(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.

L. M.
(Signature of Registered Agent)

7/27/09
(Date)

If signing on behalf of an entity:

(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)

2009 JUL 30 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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