720508

(Requesto	or's Name)
(Address)	
(Address)	
(City/State	:/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documen	t Number)
Certified Copies	Certificates of Status
	t
Special Instructions to Filing C	Officer:
I	

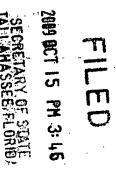
Office Use Only



100161690951



10/15/09--01018--003 **35.00



រូវ ១៩៤ នាំ១៩

pol2 10/5/09

COVER LETTER

TO: Amendmer Division of	nt Section Corporations	
SUBJECT:	Lakeside Manor Nort	h Association, Inc.
DOCUMENT NU	MBER:	720508
The enclosed States	ment of Change of Registered Offi	ce/Agent and fee are submitted for filing.
Please return all co	rrespondence concerning this matt	er to the following:
		-
	Michael Bakalar,	Business Manager
•	Name of C	ontact Person
Bakalar & Associates, PA Firm/Company		
	rimyC	ompany
	150 South Pino Isla	and Road, Suite 540
		dress
	Plantation	, FL 33324
	City/State a	and Zip Code
	natatrajaht@ninaa	kmanagamant nat
patstraight@pinoakmanagement.net E-mail address: (to be used for future annual report notification)		
	•	
For further informa	tion concerning this matter, please	call:
Mahaal D	alialas Business Manas	054
	akalar, Business Manager ne of Contact Person	at (954) 475-4244 Area Code & Daytime Telephone Number
		Thou doub a buytime Totophone Humber
Enclosed is a \$35.0	0 check made payable to the Depar	tment of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Amendment Section Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
	Switchest Strain Laboration	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: Lakeside Manor North Association, Inc.	ioriaa.			
2. The principal office address: Pin Oak Management, Inc., 4851 NW 103rd Avenue, Ste 43C Sunrise, FI 33351				
3. The mailing address (if different): PO Box 551057, Fort Lauderdale, FI 33355-	1057	_		
4. Date of incorporation/qualification: 3/16/1971 Document number:	720508			
5. The name and street address of the current registered agent and registered office on file wit Florida Department of State: (If resigned, enter resigned)	th the			
Pin Oak Management, Inc.	_			
4851 NW 103rd Avenue, Ste 43C	_			
Sunrise, FI 33351	_			
6. The name and street address of the new registered agent (if changed) and /or registered official (if changed):				
Bakalar & Associates, PA	2009 OCT 15	1		
150 South Pine Island Road, Suite 540	超二下			
P.O. Box NOT acceptable		7		
Plantation, Fl 33324 The street address of its registered office and the street address of the business office of its as changed will be identical.	s registrated agont,	•		
Such change was authorized by resolution duly adopted by its board of directors or by an authorized by the board, or the corporation has been notified in writing of the change.	officer so			
Signature of an officer or director Signature of an officer or director Printed or typed name and tit	as tresident			
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 com of my duties, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I hereb corporation has been notified in writing of this change.	aplete performance I agent. Or, if this By confirm that the			
Signature of Registered Agent 9/17/2009 Date				
If signing on behalf of an entity:				
Susan P. Bakalar, Esq. Typed or Printed Name	•			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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