

735364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

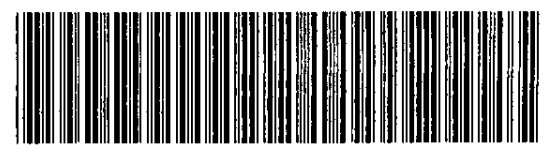
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

*TR 2-10-11*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 1, 2011

BARBARA WALSH  
BRIDGE-OF-WOOD ASSOCIATION  
3250 N.W. 85TH AVE  
CORAL SPRINGS, FL 33065

SUBJECT: BRIDGE-OF-WOOD ASSOCIATION, INC.  
Ref. Number: 735364

We have received your document for BRIDGE-OF-WOOD ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 211A00002715

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Bridge of Wood  
Name of Corporation

**DOCUMENT NUMBER:** 753-364

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:

Barbara Walsh  
Name of Contact Person

Bridge of Wood  
Firm/Company

3250 N.W. 85<sup>th</sup> Ave  
Address

Coral Springs, FL 33065  
City/State and Zip Code

BWalshccc@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Walsh at ( 954 778-7888 )  
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  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Bridge-of-Wood Association, Inc.
- 2. The principal office address: 3250 NW 85th Ave  
Coral Springs, FL 33065
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 3-24-76 Document number: 735364

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Rayton Bolin PL  
4792 W Commercial Rd  
Ft. Lauderdale, FL 33319

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

Steven Braten Esq.  
551 SE 8th St - 4th FL  
P.O. Box NOT acceptable  
Dabney Beach, FL 33483

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.

Barbara Walsh  
Signature of an officer or director

Barbara Walsh, President  
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.

[Signature]  
Signature of Registered Agent

1/17/11  
Date

If signing on behalf of an entity:

Steven R. Braten  
Typed or Printed Name

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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