

735364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

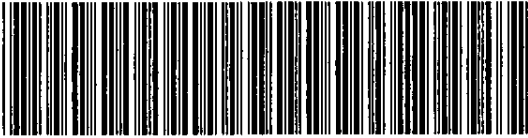
(Business Entity Name)

(Document Number)

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APPROVED
MAR 29 4 50 PM '12
STATE DEPT OF REVENUE
TALLAHASSEE, FLORIDA

AAPO

MAR 29 2012
T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bridge of Wood Assn
Name of Corporation

DOCUMENT NUMBER: 735364

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 President
Name of Contact Person

Bridge of Wood Assn
Firm/Company

3250 N W 85th 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 President 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 FI _____ 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 Assn

2. The principal office address: 3250 N. W. 85th Ave.
Coral Springs, FI 33065

3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ 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)

Steven Braten, resigned

551 S E 8th St 4th Fl

Delray Beach, FI 33483

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

Barbara Walsh, President

3250 N W 85th Ave.

P.O. Box NOT acceptable

Coral Springs, FI 33065

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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, President
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.

Barbara Walsh President
Signature of Registered Agent

3/23/12
Date

If signing on behalf of an entity:

Barbara Walsh President
Typed or Printed Name

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