

736523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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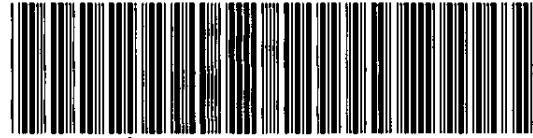
(Business Entity Name)

(Document Number)

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**SIEGFRIED, RIVERA, LERNER, DE LA TORRE & SOBEL, P.A.**

THE FORUM BUILDING | 1675 PALM BEACH LAKES BOULEVARD | SUITE 500 | WEST PALM BEACH, FL 33401  
WEST PALM BEACH 561.296.5444 | FAX 561.296.5446 | TOLL FREE 800.737.1390

JEFFREY A. REMBAUM  
JREMB@SIEGFRIEDLAW.COM

REPLY TO WEST PALM BEACH OFFICE

October 13, 2010

**Sent Via U.S. Mail**

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: The French Quarter Homeowners' Association, Inc.

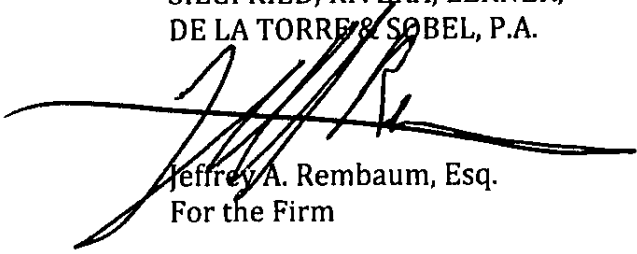
Dear Sir/Madam:

Enclosed please find the <sup>st</sup>Statement of Change of Registered Office or Registered Agent or Both for Corporations<sup>st</sup> for The French Quarter Homeowners' Association, Inc., along with check #224386 in the amount of \$35.00 for the filing of same.

If you have any questions or require further documentation, please contact the undersigned.

Very truly yours,

SIEGFRIED, RIVERA, LERNER,  
DE LA TORRE & SOBEL, P.A.



Jeffrey A. Rembaum, Esq.  
For the Firm

JAR/kmr  
Enclosures

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The French Quarter Homeowners' Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** 736523

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:

Shanika McClinton, President  
Name of Contact Person

Firm/Company

P.O. Box 211741  
Address

Royal Palm Beach, FL 33421  
City/State and Zip Code

smsuces@att.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kelly Rodriguez at ( 561 ) 296-5444  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The French Quarter Homeowners Association, Inc.  
2. The principal office address: 12000 Basin Street, Wellington, FL 33414

3. The mailing address (if different): c/o Banyan Property Mgmt, 2328 S Congress Ave., Suite 1-C, West Palm Beach, FL 33406

4. Date of incorporation/qualification: 08/04/1976 Document number: 736523

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)  
Siegfried, Rivera, Lerner, De La Torre & Sobel, P.A.  
1675 Palm Beach Lakes Blvd., Suite 500  
West Palm Beach, FL 33401

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TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
SKRLD, Inc.  
201 Alhambra Circle, #1102  
P.O. Box NOT acceptable  
Coral Gables, FL 33134

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.

*Shanika McClinton*  
Signature of an officer or director

Shanika McClinton, 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.*

*L.A. Lerner*  
Signature of Registered Agent

10/18/10  
Date

If signing on behalf of an entity:  
Lisa A. Lerner  
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)