## 743775

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## **COVER LETTER**

Division of Corporations
SUBJECT: The Crossings Landowners Association, Inc.
(Name of corporation)
DOCUMENT NUMBER: 743755
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:
Terry McGregor
(Name of contact person)
TMC Managament
TMG Management (Firm/Company)
( <del>) ()</del>
2641 East Atlantic Blvd., Suite 310
(Address)
Pompano Beach, FL 33062
(City/state and zip code)
For further information concerning this matter, please call:
Terry McGregor at (954) 782-7820  (Name of contact person) (Area code & daytime telephone number)
(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 409 E. Gaines Street Tallahassee, FL 32319

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	pròvisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: The Crossings Landowners Association, Inc.
	office address: 2641 East Atlantic Blvd., Suite 310, Pompano Beach, FL 33062
3. The mailing a	address (if different): 2641 East Atlantic Blvd., Suite 310, Pompano Beach, FL 33062
4. Date of incor	poration/qualification: 08/02/1978 Document number: 743755
	d street address of the current registered agent and registered office on file with the rtment of State:
	Katzman & Korr, P.A.
	1501 NW 49th Street, Suite 202
	Fort Lauderdale, FL 33309
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	TMG Management
	2641 East Atlantic Blvd., Suite 310
	(P.O. Box NOT acceptable)
The street addr	ess of its registered office and the street address of the business office of its registered agent.
authorized by t	ras authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Mignat	Cheryl Purificato, President, The Crossings  (Printed or typed name and title)
document is be	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance nd I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
/ (s	ignature of Acgistered Agent) (Date)
L	ehalf of an entity:
	or, TMG Management
- (	Typed or Printed Name)

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