

746341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

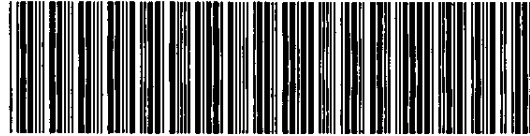
(Business Entity Name)

(Document Number)

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2014 JAN 14 PM 1:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA/RO/chs
(10) : 1114/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 20, 2013

WALLY BALDWIN, ESQ.
LAW OFFICES OF STABLER AND BALDWIN
5405 OKEECHOBEE BLVD., STE. 202
WEST PALM BEACH, FL 33417

SUBJECT: DELRAY VILLAS PLAT NO. 1 HOMEOWNERS' ASSOCIATION,
INC.
Ref. Number: 746341

We have received your document for DELRAY VILLAS PLAT NO. 1 HOMEOWNERS' 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):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 013A00028934

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Delray Villas Plat No. 1 Homeowners' Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 746341

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:

Wally Baldwin, Esq.

Name of Contact Person

Law Offices of Stabler & Baldwin, PA

Firm/Company

5405 Okeechobee Blvd, Suite 202

Address

West Palm Beach, FL 33417

City/State and Zip Code

wallybaldwinlaw@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wally Baldwin, Esq.

Name of Contact Person

at (561) 471-7100

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

RECEIVED
14 JAN 14 AM 8:45
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32301

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: Delray Villas Plat No. 1 Homeowners' Association, Inc.
2. The principal office address: 14237 Campanelli Drive
Delray Beach, Florida 33484
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/20/1979 Document number: 74634

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)

Law Offices of Paul J. Burkhardt, PL c/o Wally Baldwin, Esq.

800 Village Square Crossing

Palm Beach Gardens, Florida 33410

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

Wally Baldwin, Esq.

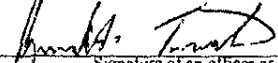
5405 Okeechobee Blvd, Suite 202

P.O. Box NOT acceptable

West Palm Beach, Florida 33417

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.


Signature of an officer or director

Jerrold Trust, 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 of Registered Agent

1/9/13
Date

If signing on behalf of an entity:

Wally Baldwin

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 (03/12)