750390

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COVER LETTER

SUBJECT: Blue Lake Townhouse Oordominium, Inc. (Name of corporation) DOCUMENT NUMBER: T50390 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: David L. Brough, Esq. (Name of contact person) Bough, Chadrow & Leving, P. A. (Firm/Company) 1900 N. Commerce Parkway (Address) Weston FL 33326 (City/state and zip code) For further information concerning this matter, please call: David L. Brough (Name of contact person) at (954, 384, 0732 (Area code & daytime telephone number)	PO: Amendment Section Division of Corporations
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: David L. Brough, Esq. (Name of contact person) Brough, Chadrow & Levine, P. A. (Firm/Company) 1900 N. Commerce Parkway (Address) Weston, PL 33326 (City/state and zip code) For further information concerning this matter, please call:	SUBJECT: Blue Lake Townhouse Condominium, Inc. (Name of corporation)
Please return all correspondence concerning this matter to the following: David L. Brough, Esq. (Name of contect person) Brough, Chadrow & Levina, P. A. (Firm/Company) 1900 N. Commerce Parkway (Address) Weston, FL 33306 (City/state and zip code) For further information concerning this matter, please call:	DOCUMENT NUMBER: 750390
David L. Brough, Esq. (Name of contect person) Brough, Chadrow & Leving, P.A. (Firm/Company) 1900 N. Commerce Parkway (Address) Weston, PL 33326 (City/state and zip code) For further information concerning this matter, please call:	The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
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	David L. Brough at (954) 384 0732 (Name of contact porson) (Area code & daytime telephone number)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

statement of change is submitted for a corporation organized under the laws of the State ofin order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Blue Lake Townhouse Condominium, 1	nc,
2. The principal office address: Phnenix Hampemant Services 4780 N. State Rd. 7, Swite E-250, Lauderdale lake	<u></u>
3. The mailing address (if different):	<u> </u>
4. Date of incorporation/qualification: 12/28/1979 Document number: 750390	<u></u>
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Brough, Chadrow & Lavine, P.t. 27700 8. Commerce Parkway, Ste 3058 Weston, FL 33331 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Brough, Chadrow & Levine, P.A.	
1900 N. Commerce Parkerney (PO Box NOT acceptable)	
Weston, FL 33326	esiller Soloto solotes
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 other or director) Thereby accept the appointment of registered agent and agree to act in this capacity 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 locument 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 Régistered Agent) (Signature of Régistered Agent) (Date) (Date)	·

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