759187

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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COVER LETTER

то:	Amendment Division of	nt Section Corporations				
SUBJI	ECT: O	AKPARK CONDOMINIUN Name of C	M ASSOCIATION, I	NC.		
DOCU	JMENT NU	MBER:	759187			
The en	closed States	ment of Change of Registered Office	e/Agent and fee are submit	ted for filing.		
Please	return all co	rrespondence concerning this matter	to the following:			
TODD JACKSON						
Name of Contact Person						
CAPITAL REALTY ADVISORS, INC.						
Firm/Company						
600 SANDTREE DRIVE, SUITE 109						
Address						
PALM BEACH GARDENS, FL 33403 City/State and Zip Code						
			16 d. C			
Cluce@capitalrealtyadvisors.com E-mail address: (to be used for future annual report notification)						
D man address. (to be used for fatale annual report notification)						
For fur	ther informa	tion concerning this matter, please of	call:			
	T	ODD JACKSON	at (561)	624-5888		
	Nan	ne of Contact Person	at (561) Area Code & Daytin	me 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 Se Division of Co Clifton Buildin 2661 Executiv Tallahassee, Fl	rporations ig e Center Circle		

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)