

761119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

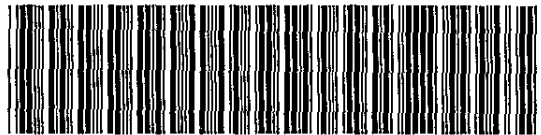
(Business Entity Name)

(Document Number)

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*RA Charge
T. Lewis*

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05 JUL 18 AM 8 39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07/05/05--01007--024 **35.00

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dos Lagos HOA Inc.
(Name of corporation)

DOCUMENT NUMBER: 761119

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:

Ed Dicker
(Name of contact person)

Dicker, Krivok & Stoloff P.A.
(Firm/Company)

1818 Australian Ave South Suite 400
(Address)

West Palm Bch. FL 33409
(City/state and zip code)

For further information concerning this matter, please call:

Ed Dicker at (561) 615-0123
(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 32399

OK TO PAY
DATE 6/14/05
ACCT# 5060
APPROVED _____



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

June 27, 2005

DOS LAGOS HOMEOWNERS ASSOCIATION, INC.
% BANYAN PROPERTY MGMT
2328 S CONGRESS AVE., STE 1-C
WEST PALM BEACH, FL 33406

SUBJECT: DOS LAGOS HOMEOWNERS ASSOCIATION, INC.
Ref. Number: 761119

We received this check with no attachments. To prevent delays in filing and improper application of fees, please return this check together with the appropriate document for filing.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 905A00043386

RECEIVED
JUL 18 AM 10:00
FOR MR. L. J. HARRIS

7-6-05

No Statement of Change of Registered Office/
Agent form was enclosed. \$35.00 pending.
Please see attached

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Dos Lagos HOA Inc.
2. The principal office address: c/o Banyan Property Management
2328 S. Congress Ave., Suite 1-C WPB FL 33406
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/15/81 Document number: 761119

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Associated Property Management
1928 Lake Worth Road
Lake Worth FL 33461

FILED
05 JUL 18 AM 8:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Dicker, Krivak & Stoloff, PA.
1818 Australian Ave. South Suite 400
(P.O. Box NOT acceptable)
WPB FL 33409

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)

(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.

Edn Dicks
(Signature of Registered Agent)

6/8/05
(Date)

If signing on behalf of an entity:

Dicker Krivak & Stoloff
(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