

N00000006031

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

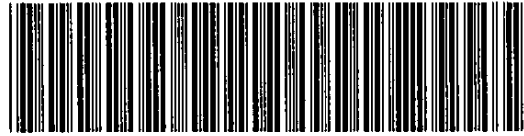
(Business Entity Name)

(Document Number)

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Change*

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2012 MAY 11 PM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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*DR
5/16/12*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CASA Royale H.O.A Inc
Name of Corporation

DOCUMENT NUMBER: NO00000006031

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:

Kathy Ingersoll
Name of Contact Person

Associated Property Management
Firm/Company

1928 Wake Wood Rd
Address

Wake Wood, Florida 33461
City/State and Zip Code

KIngersoll@Assocpropmt.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy Ingersoll at (561) 588-7210
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
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: CASA Royal Homeowners Association, Inc.
- 2. The principal office address: 1928 Lake Woodh Rd.
lake Woodh, Florida 33461
- 3. The mailing address (if different): SAME
- 4. Date of incorporation/qualification: _____ Document number: N000000006031

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)

Michael J. Posner Esq.
4420 Beech Circle
West Palm Beach, FL 33411

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CORPORATION
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
PH: 20

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

Associated Property Management
1928 Lake Woodh Rd.
P.O. Box NOT acceptable
lake Woodh, FL 33461

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.

N/A
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.

[Signature]
Signature of Registered Agent

Date

If signing on behalf of an entity:
BRIAN McELHEE
Typed or Printed Name

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