NO200002681

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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	TIAW [MAIL
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(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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10-18 10-18

COVER LETTER

SUBJECT: Nautica Isles West Homeowners Association, Inc. (Name of Corporation) DOCUMENT NUMBER: N02000002681 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: Jennifer L. McQuain (Name of Contact Person) GRS Management Associates, Inc. (Firm/Company) 3900 Woodlake Blvd., Suite 309 Lake Worth, FL 33463 (City/State and Zip Code) For further information concerning this matter, please call: 561) 641-8554 x 107 (Area Code & Daytime Telephone Number) Jennifer L. McQuain (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1 hange is submitted for a corporation organized und der to change its registered office or registered age	der the laws of the State of Florida	····
1. The name of	f the corporation: Nautica Isles West Homeowi	ners Association, Inc.	
2. The principal	al office address: 3900 Woodlake Blvd., Suite 3	309, Lake Worth, FL 33463	
3. The mailing a	address (if different):		
4. Date of incorp	prporation/qualification: Do	ocument number: N02000002681	
	nd street address of the current registered agent and artment of State:	I registered office on file with the	
	Stein, Rosenberg & Stein, P. A.		
	4875 N Federal Hwy 7th Floor	75 G	-
	Ft. Lauderdale, FL 33308	CRE	
6. The name and (if changed):	Levine Burr, BATWANS (P.O. Box NOT acceptable) Palm Beach Gardens, FL 33410		2 PH 1: 31
The street addre as changed will	ress of its registered office and the street address il be identical.	of the business office of its registered a	agent,
Va ignati	attre of an officer or director)	HOWARD EIMER (Printed or typed name and title)	
I hereby accept I further agree t of my duties, an document is beil corporation has	nt the appointment as registered agent and agree to comply with the provisions of all statutes rela and I am familiar with and accept the obligation of the principle in the registe as been notified in writing of this change.	to act in this capacity. tive to the proper and complete perfort of my position as registered agent. Or, ered office address, I hereby confirm the	mance if this at the
Joseph (Sig	ignature of Registered Agent)	9-28-05 (Date)	
	ehalf of an entity:	• •	
Jay Ste	eventeuine press		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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