

N040000000010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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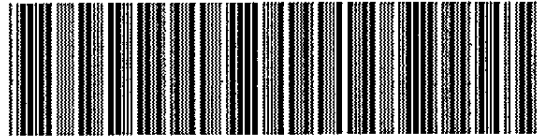
(Business Entity Name)

(Document Number)

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January 29, 2007

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Re: *Springcrest Condominium Association, Inc.  
Change of Registered Agent***

Dear Sir / Madam:

Enclosed please find the *Statement of Change of Registered Office or Registered Agent or Both for Corporations* which has been properly filled out by this office. Furthermore, enclosed please find a check made payable to the Department of State in the amount of \$35.00. Should you require any further information or documentation with respect to the Change of Registered Agent for the above referenced corporation, please contact me at the number listed below.

Sincerely,

KATZMAN & KORR, P.A.

Ferran L. Korr, Esq.  
Managing Partner

FLK:vl  
Enclosure  
cc: Board of Directors  
Property Manager



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 5, 2007

KATZMAN & KORR, P.A.  
1501 NW 49 ST STE 202  
FT LAUDERDALE, FL 33309

SUBJECT: SPRINGCREST CONDOMINIUM ASSOCIATION INC.  
Ref. Number: N04000000010

We have received your document for SPRINGCREST CONDOMINIUM ASSOCIATION INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please have Ferren L. Korr, Esq. sign the registered agent acceptance.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith  
Document Specialist

Letter Number: 507A00008617

RECEIVED  
07 FEB 13 AM 8:00  
DIVISION OF CORPORATIONS

**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: Springcrest Condominium Association Inc.
2. The principal office address: 4245 N. UNIVERSITY DR  
SUNRISE FL 33351
3. The mailing address (if different): 10 SUNDANCE PROPERTY MANAGEMENT-  
11404 WEST SAMPLE RD, CORAL SPRINGS, FL 33065
4. Date of incorporation/qualification: 12/29/2003 Document number: N04000000010
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Sundance Property Management

11404 West Sample Road

Coral Springs, Florida 33065

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

Katzman & Korr, P.A.

1501 Northwest 49th Street, Suite 202

(P.O. Box or personal mailbox NOT acceptable)

Fort Lauderdale, Florida 33309

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 authorized by the board, or the corporation has been notified in writing of the change.

Barbara Thompson

(Signature of an officer, chairman or vice chairman of the board)

BARBARA THOMPSON SECRETARY  
RAMON CAMACHO - TREASURER

(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)

2/8/07  
(Date)

If signing on behalf of an entity:

FELIX L. KORM, ESQ.  
(Typed or Printed Name)

Katzman & Korr, P.A.  
(Capacity)

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

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

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