N05000007781

THE CONTINENTAL GROUP, INC 2950 N. 28th Terrace • Hollywood, Florida 33020

(Address)

(City/State/Zip/Phone #)

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W. S. S.

M12-4

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

*		17.0502, 607.1508, or 617.1508, Florida Statutes, th	b
	= =	under the laws of the State of FLORIDA	in order
to change its registered off	ice or registered agent,	or both, in the State of Florida.	
1. The name of the corpora	ation: COURTYARDS	AT DAVIE CONDOMINIUM ASSOCIATION, I	NC.
2. The principal office add	ress: 8151 PETERS	ROAD, CROSSROADS BLDG., #2	
	PLANTATION,	, FL 33324	
3. The mailing address (if o	different):		
4. Date of incorporation/qu	ualification: 07/29/05	Document number: N05000007781	
5. The name and street add Florida Department of S		tered agent and registered office on file with the	070EC TI
JEFF	REY R. MARGOLIS,		
c/o DU	JANE MORRIS LLP,	200 S. BISCAYNE BLVD., SUITE 3400	e in
MIAN	MI, FL 33131	STA	<u> </u>
6. The name and street add (if changed):	lress of the new register	ed agent (if changed) and /or registered office	ı
SKRI	LD, INC.		•
201 A	LHAMBRA CIRCLE,		
	(P.O. Box or p	personal mailbox NOT acceptable)	
CORA	L GABLES, FL 3313	4	
The street address of its rechanged will be identical.	egistered office and the	e street address of the business office of its register	ed agent, as
Such change was authorize the board, or the corporate	zed by resolution duly a ion has been notified in	adopted by its board of directors or by an officer son writing of the change.	authorized by
X Mallare	Scheroger	MARLENE SCHR. (Printed or typed name and titl	AGER
, , -	in officer or director) intment as registered as with the provisions of with and accept the ob- ect a change in the regi- f this change.	gent and agree to act in this capacity. all statutes relative to the proper and complete per ligation of my position as registered agent. Or, if istered office address, I hereby confirm that the con	
Lud		10/25/07	
(Signature of	Registered Agent)	(Date)	·
If signing on behalf of an	entity:		
LISA A. LERNER		SECRETARY	
(Typed or F	Printed Name)	(Capacity)	

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