

N18981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

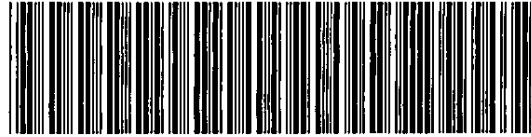
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/12/06--01032--015 **35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ATTORNEYS AT LAW

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WEST PALM BEACH, FL 33401

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BY APPOINTMENT:

COMPSON FINANCIAL CENTER
980 NORTH FEDERAL HIGHWAY
SUITE 434
BOCA RATON, FL

REPLY TO WEST PALM BEACH

October 10, 2006

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

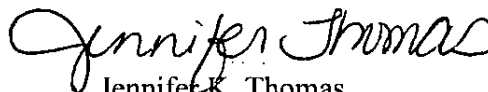
**Re: Saratoga Bay Homeowners Association, Inc.
/Registered Agent**

Dear Sir/Madame:

Enclosed is the original Statement of Change of Registered Office or Registered Agent, or Both regarding Saratoga Bay Homeowners Association, Inc. Also enclosed is Saratoga Bay Homeowners Association, Inc.'s check number 1727 in the amount of \$35.00 made payable to the Division of Corporations.

The Association submits the enclosed Statement for the purpose of changing the Association's registered agent from John D. Cates to Michael J. Gelfand, Esquire. If there is any additional information you may require in order to effect this change, then please do not hesitate to contact the firm.

Very truly yours,



Jennifer K. Thomas
For the Firm

JKT/kgm
Enclosures

cc: Saratoga Bay Homeowners Association, Inc.

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**STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of Sections 607.0502, 617.0502, 607.1508 and 617.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Saratoga Bay Homeowners Association, Inc.
- 1a. Date of incorporation 01/28/1987. Document number: N18981
2. The name and address of the present registered agent and office:

John D. Cates
2615 Mohawk Circle
West Palm Beach, Florida 33409

3. The name and address of the successor registered agent and office:
(P.O. BOX NOT ACCEPTABLE)

Michael J. Gelfand, Esquire
GELFAND & ARPE, P.A.
Regions Financial Tower, Suite 1220
1555 Palm Beach Lakes Boulevard
West Palm Beach, Florida 33401-2329

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The address of its registered agent and the 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.

SIGNATURE 
(President or Vice President)

DATE 10/16/06

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 617.0503 FLORIDA STATUTES.

SIGNATURE 
(Registered Agent)

DATE 10/10/06

FILING FEE: \$35.00

DIVISION OF CORPORATIONS - P.O. BOX 6327 - TALLAHASSEE, FL 32314