

N26712

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T. ROBERTS

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**ST. JOHN ROSSIN  
PODESTA BURR & LEMME, PLLC**  
LAW OFFICES

DAVID ST. JOHN  
ALLEN E. ROSSIN\*  
CARI A. PODESTA  
THERESA M. LEMME  
ROBERT BURR  
TYLER POWELL  
CHELLÉ KONYK  
JOSEPH D. LEE  
JOSEF M. FIALA  
SEBASTIAN K. POPRAWSKI

OF COUNSEL  
THOMAS E. ROSSIN

FIRM ADMINISTRATOR  
ALBERT J. FIELDER, JR.

November 2, 2012

\*Board Certified Civil  
Trial Lawyer

Board of Directors  
Westchester Country Club  
Homeowners Association, Inc.  
(Starlight Cove)  
c/o First Choice Property Management Group, Inc.  
6468 East Rogers Circle  
Boca Raton, FL 33487

Attn: Tara Miller,  
Vice President, LCAM

**Re: Change of Registered Agent**

Dear Ms. Miller:

Enclosed is the Statement of Change of Registered Agent which we have prepared at the Association's request to change the registered agent to Robert B. Burr, Esquire, c/o St. John Rossin Podesta Burr & Lemme, PLLC. We used the address for First Choice that was on the state records.

Please have the President or Vice President of the Association sign this document and print his/her name and title in the appropriate space as indicated by the arrow. Then please return the document to us along with a check payable to "Florida Department of State" for \$35.00 and we will submit it to the Florida Department of State.

Very truly yours,

ROBERT B. BURR  
For the firm

Enclosure

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** WESTCHESTER COUNTRY CLUB HOMEOWNERS' ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** N26712

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:

**ROBERT B. BURR, ESQ.**

Name of Contact Person

ST. JOHN ROSSIN PODESTA BURR & LEMME, PLLC

Firm/Company

1601 FORUM PLACE, SUITE 700

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

**rburr@stjohnrossin.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**ROBERT B. BURR, ESQ.** at ( **561** ) **655-8994**

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: Weschester Country Club Homeowners' Association, Inc.

2. The principal office address: c/o First Choice Property Management Group, Inc.,  
4755 Technology Way, Suite 202, Boca Raton, FL 33431

3. The mailing address (if different): same as above

4. Date of incorporation/qualification: 06/01/1988 Document number: N26712

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)  
FIRST CHOICE PROPERTY MANAGEMENT GROUP, INC.  
4755 Technology Way, Suite 202  
Boca Raton, FL 33431

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
ROBERT B. BURR, ESQ.  
1601 Forum Way, Suite 700  
P.O. Box NOT acceptable  
West Palm Beach, FL 33401

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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.

[Signature]  
Signature of an officer or director

Bryan Barrett  
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

11-2-12  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (03/12)