

N 26952

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

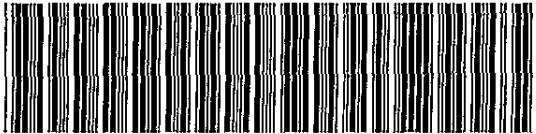
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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LAW OFFICES
GUY SPIEGELMAN
SUITE 400 ROBERTS BUILDING
28 WEST FLAGLER STREET
MIAMI, FLORIDA 33130
TELEPHONE (305) 373-6634

August 24, 2005

Secretary of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: **BAYSIDE VILLAGE EAST CONDOMINIUM ASSOC., INC.**

Dear Sir or Madam:

Enclosed is the Statement of Change of Registered Office/Agent for the above corporation as well as a check in the sum of \$35.00 representing your fee.

Please forward a copy of the Change of Registered Agent to this office in the enclosed self-addressed envelope, representing proof of filing.

Sincerely,


GUY SPIEGELMAN
GS:ds
Enc.

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: BAYSIDE VILLAGE EAST CONDOMINIUM ASSOCIATION, INC.
2. The principal office address: ONE FISHER ISLAND DRIVE
FISHER ISLAND FLORIDA 33109 US
3. The mailing address (if different): _____

4. Date of incorporation/qualification: June 15, 1988 Document number: n26952

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

GARY POLIAKOFF
3111 STIRLING ROAD
FORT LAUDERDALE FLORIDA 33312


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TALLAHASSEE, FLORIDA

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

GUY SPIEGLMAN
28 WEST FLAGLER STREET SUITE 400
(P.O. Box NOT acceptable)
MIAMI FLORIDA FLORIDA 33130

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 of an officer or director) IRWIN M. POTASH MD Pres. (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 of Registered Agent) 8/23/05 (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