

N35287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

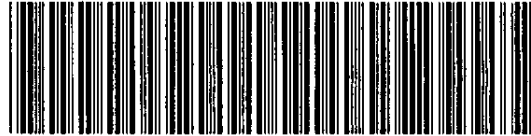
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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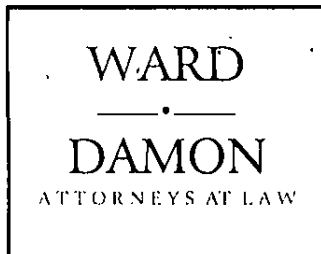
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DIVISION OF CORPORATIONS
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4420 BEACON CIRCLE
WEST PALM BEACH, FL 33407
Tel: (561) 842-3000
Direct Dial: (561) 594-1452
Fax: (561) 842-3626
www.warddamon.com

*Michael J Posner, Esquire
Board Certified Real Estate Attorney
mjposner@warddamon.com*

August 11, 2015

Florida Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL32314

Re: Palm Cove Property Cove Association

Dear Sir/Madam

Enclosed for filing please find a Statement of Change of Registered Resident Agent for the above referenced entity together with our check in the sum of \$35.00 representing the fee for same. Please date stamp the enclosed copy of same, showing receipt of same, and return it in the self addressed stamped envelope.

Thank you for your assistance in this matter and if you have any questions, please feel free contact me.

Very truly yours,

A handwritten signature in black ink, appearing to be "Christina Zingman", written over a circular stamp or mark.

Christina Zingman
Legal Assistant to
Michael J Posner
For the Firm

/cz

Encls.

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: Palm Cove Property Owners Association, Inc.
2. The principal office address: c/o GRS Management
2900 Woodlake Blvd., #309, Lake Worth, FL 33463
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/20/1989 Document number: N35287
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)

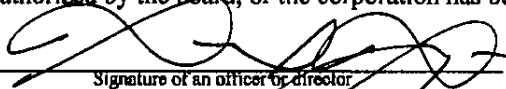
Arlene Gill
c/o Florida Condo & Assoc. Mgmt, Inc.
4050 S. US Highway One, #230, Jupiter, FL 33477

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

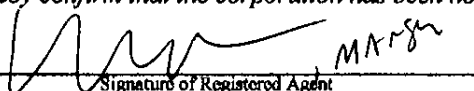
Ward Damon Business Services, LLC
4420 Beacon Circle
P.O. Box NOT acceptable
West Palm Beach, FL 33407

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.

 David Dreyer, President
Signature of an officer or director 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.

 8/11/15
Signature of Registered Agent Date

If signing on behalf of an entity:
Mr. Carl J. Poon
Typed or Printed Name

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

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