N35982

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COVER LETTER

TO: /	Amendment Section Division of Corporations	
SUBJEC	Palm Cove Golf & Yacht Club Comr	nunity Association, Inc.
SODUL	Name of Co	rporation
DOCUM	N35982 MENT NUMBER:	
The encl	osed Statement of Change of Registered Office	Agent and fee are submitted for filing.
Please re	eturn all correspondence concerning this matter	to the following:
	Jane Cornett, Esq.	
	Name of Con	tact Person
	Becker & Poliakoff, P.A.	
Firm/Company		
401 SE Osceola Street, First Floor		
Address		
	Stuart, FL 34994	
City/State and Zip Code		
	E-mail address: (to be used for fu	ture annual report notification)
For furth	ner information concerning this matter, please c	all:
Jane C	Cornett	772 286-2990
	Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed	l is a \$35.00 check made payable to the Departs	ment of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida
	to change its registered office or registered agent, or both, in the State of Florida. the corporation: Palm Cove Golf & Yacht Club Community Association, Inc.
2. The principal	office address: 262 SW Palm Cove Drive, Palm City, FL 34990
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 1/5/1990 Document number: N35982
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Scott Turnbull, Esq.
	759 SW Federal Hwy, Suite 106
	Stuart, FL 34994 CC H T
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Jane Cornett, Esq. Becker & Poliakoff, P.A.
	401 SE Osceola Sireet, First Floor
	P.O. Box NOT acceptable Stuart, FL 34994
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
Suddignatur	re of an explication Printed or typed name, and title
i juriner agree i performance of	the appointment as registered agent and agree to act in this capacity, o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Sign	nature of Registered Agent 34 Date
If signing on bel	half of an entity:
Jane L. Com	ett, Esq.
Ту	rped or Printed Name

* * * FILING FEE: \$35.00 * * *
CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE