

N96000004580

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Alhambra Homeowners Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N96000004580

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:

Steven Reed Cohen, esq.  
Name of Contact Person

Steven Reed Cohen, P.A.  
Firm/Company

5599 S. University Drive, Ste. 303  
Address

Davie, FL 33328  
City/State and Zip Code

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

For further information concerning this matter, please call:

Steven Cohen, esq. at ( 954 ) 436-9895  
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: Alhambra Homeowners Association, Inc.
2. The principal office address: c/o Pines Property Management 19620 West Pines Blvd., Ste. 205, Pembroke Pines, FL 33029
3. The mailing address (if different): c/o Pines Property Management POB 820100, South Florida, FL
4. Date of incorporation/qualification: 8/29/1996 Document number: N96000004580
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)

Lawrence D. Bache, Esq.
9000 W. Sheridan St., Ste. 174
Pembroke Pines, FL 33024

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

Steven Reed Cohen, P.A.
5599 S. University Drive, Ste. 303
Davie, FL 33328

P.O. Box NOT acceptable

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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 of an officer or director

Lisa Castillo, President
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

8/16/2012
Date

If signing on behalf of an entity:
Steven Reed Cohen, Esq., President
Typed or Printed Name

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