N9800000 911

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE

act PA

Florida Department of State, Sandra B. Mortham, Secretary of State

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, the
undersigned corporation organized under the laws of the State of \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
submits the following statement in order to change its registered office or registered agent, or both, in the
State of Florida.
1. The name of the corporation is: The Vineyards OF Boca Katon
Home Owners HSSOCIATION, Luc
2. The mailing address of the corporation is: CO J+L Property Mamt, Noe
10191 West Sample Road, Suite 203, Coral Springs, FL 33065
3. Date of incorporation/qualification:
4. The name and address of the current registered agent and office:
Round Value
Time varyo
1100 W. Camino heal Pr & T
Suite 117, Boca Paton, FL 33433 & = =
5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)
Transa (1) 250333
DHIVES CAIDEN HZZO
To Uth Property Mant
10191 W. Sample Rd. Stute 203 Coral Springs, FL 33065
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.
Signature of an officer, chairman of the board) (Bignature of an officer, chairman of the board)
Ileen N. Kaufman, Vice President (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
Jama Gd 112/06
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
TAMES Calder A 220 Property Manager (Typed or Printed Name) Roperty Manager (Capacity)

CR2F045(1/95)