770325

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

Office Use Only



100040779461

09/10/04--01012--022 **35.00

O4 SEP 10 AH II: 40

T BROWN SEP 1 7 2004

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: OLD CUTLER LAKES BY THE BA	Y COMMUNITY ASSOCIATION, INC.	
DOCUMENT NUMBER: 770325	and the state of t	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
ROBERT E. PAIGE, ESQ. (Name	e of contact person)	
(I	irm/Company)	
9500 South Dadeland Boulevard, Suite 550 (Address)		
Miami, FL 33156 (City.	state and zip code)	
For further information concerning this matter,	please call:	
Robert E. Paige, Esq.	at (305) 670-0020 (Area code & daytime telephone number)	
(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 Corporation P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399	

TO:

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; OLD CUTLER LAKES BY THE BAY COMMUNITY ASSOCIATION, INC.
2. The principal office address: 9780 S.W. 216 Street, Miami, FL 33190
3. The mailing address (if different): c/o The Continental Group, Inc., Suite 201, 11981 S.W. 144 Court,
Miami, FL 33186
4. Date of incorporation/qualification: 9-21-83 Document number: 770325
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Robert E. Paige
4500 South Dadeland Boulevard Suite 550
Miami, FL 33156
Miami, FL 33156 Miami, FL 33156 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Robert E. Paige
Robert E. Paige
9500 South Dadeland Boulevard, Suite 550
(P.O. Box NOT acceptable)
Miami, FL 33190
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.
L JACQUELINE SHAND 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.
My 51 Pußlim & Poster 9/8/04 (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

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