72/130

(Red	questor's Name)		
(Add	dress)		
(Add	dress)		
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



900082153619

RAChange
Reuli
12/01/06--01052--001 **35.00

COVER LETTER

TO: Amendment Division	ent Section of Corporations			
SUBJECT: THE LANDS OF THE PRESIDENT CONDOMINIUM ONE, INC. (Name of Corporation)				
DOCUMENT N	UMBER: 721130			
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:				
	,			
CHERYL BENDER				
(Name of Contact Person)				
CMC MANAGEMENT, INC.				
(Firm/Company)				
	2950 JOG R			
	(Addi			
	`	,		
	CDEENACRES EL 22467			
GREENACRES, FL 33467 (City/State and Zip Code)				
F 6		•		
For further inform	nation concerning this matter, please c	an:		
CHERYL BEND	DER	at (561) 641-1016 (Area Code & Daytime Telephone Number)		
1)	lame of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a \$35	.00 check made payable to the Depart	ment of State.		
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building		

Tallahassee, FL 32301

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

statement of cha	ange is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of FLORIDA registered agent, or both, in the State of Florida.
1. The name of t	the corporation: THE LANDS OF T	HE PRESIDENT CONDOMINIUM ONE, INC.
	office address: 2950 JOG ROAD	
	GREENACRES	, FL 33467
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 06/10/1971	Document number: 721130
	d street address of the current registertment of State:	ered agent and registered office on file with the
	SCOT GERRISH C/O CMC	MANAGEMENT, INC.
	2994 JOG ROAD, SUITE E	3
	GREENACRES, FL 33467	
6. The name and (if changed):	d street address of the new registere	d agent (if changed) and /or registered office
	ST. JOHN, CORE, & LEM	ME, P.A.
	1601 FORUM PLACE, SU	ITE 701
	(P.O. Box NOT acc	72
	WEST PALM BEACH, FL	33401
The street address changed will	ess of its registered office and the l be identical.	street address of the business office of its registered agent,
Such change was	as authorized by resolution duly a he board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.
Jan &	emQ	Slacy Gumalo VA.
I horoby goodni	t the appointment as registered ag to comply with the provisions of a nd I am familiar with and accept ti ing filed merely to reflect a chang s been notified in writing of this ci	ent and agree to act in this capacity. Il statutes relative to the proper and complete performance he obligation of my position as registered agent. Or, if this e in the registered office address, I hereby confirm that the hange.
(Te) de	ignature of Registered Agent)	11-20-2006
(Si	ignature of Registered Agent)	(Date)
If signing on be	ehalf of an entity:	
DAVID A.		
•	Typed or Printed Name)	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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