# 744559

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

Office Use Only



200162130902

11/16/09--01025--018 \*\*35.00

09 DEC -4 AM 8: 5

FILED SECRETARY OF STATE TALLAHASSEE, FLORIÐA

RA RO Ch8

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

RECEIVED

OCT 0 9 2009

BY:

SUBJECT:	Aviara Homeowners Association, Inc.  Name of Corporation	
DOCUMENT NUM	BER:	
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:		
_	Gary Budd Name of Contact Person	
· _	Crest Management Group, Inc.	
	Firm/Company	
_	6413 Congress Avenue, Ste. 200 Address	
_	Boca Raton, FL 33487 City/State and Zip Code	
Ē	gbudd@crestmanagementgroup.com -mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:		
Name	Gary Budd at (561) 994-2334 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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 18, 2009

GARY BUDD CREST MANAGEMENT GROUP, INC. 6413 CONGRESS AVENUE - STE. 200 BOCA RATON, FL 33487

SUBJECT: AVIARA HOMEOWNERS ASSOCIATION, INC.

Ref. Number: 744559

We have received your document for AVIARA HOMEOWNERS ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 609A00035972

## 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: Aviara Homeowners Association, Inc.
2. The principal office address: Joseph Di Gilio, 22224 B Boca Rancho Drive, Boca Raton, FL 33428
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/12/1978 Document number: 744559
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)
The Chapman Law Firm, P.A.
7700 Congress Ave, Ste. 3204
Boca Raton, FL 33487
The Chapman Law Firm, P.A.  7700 Congress Ave, Ste. 3204  Boca Raton, FL 33487  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Crest Management Group, Inc.
6413 Congress Avenue, Ste 200
P.O. Box NOT acceptable  Boca Raton, FL 33487
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 office or director  Signature of an office or director  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 12/1/ P
If signing on behalf of an entity:
Typed or Printed Name

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

### STATE OF FLORIDA COUNTY OF PALM BEACH

THE FOREGOING instrument was acknowledged before me this 151 day of Duly 2009, by Say Bull , Agent of Plaintiff, who was personally known to me.

WITNESS my hand and official seal at the County and State aforesaid this <u>1st</u> day of <u>Wesenster</u>, 2009.

Notary Public

My commission expires:

