| (Re | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ac | ddress) | |
| (Ac | ddress) | |
| (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
| (Ви | usiness Entity Na | me) |
| (Do | ocument Number) | |
| Certified Copies | Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| (| | j |

Office Use Only



600238573316

08/20/12--01030--016 **35.00

HRO Charge

AUG 2 2 2012

T. CAULEY

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT. Huntington Lakes Section Five Association, Inc.

Name of Corporation

DOCUMENT NUMBER: N13564

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:

Joshua Gerstin, Esq.

Name of Contact Person

Gerstin & Associates

Firm/Company

40 S.E. 5th Street, Suite 610

Address

Boca Raton, FL 33432

City/State and Zip Code

lisa.kochlany@gmail.com

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

For further information concerning this matter, please call:

Joshua Gerstin, Esq., or Lisa Kochlany

,561

750-3456

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 in order to change its registered office or registered agent, or both, in the State of Florida. |
|--|
| 1. The name of the corporation: Huntington Lakes Setion Five Association, I) |
| 2. The principal office address: 7290 Kinghurst Dr Apt 410 Delray Beach, FL 33446 |
| 3. The mailing address (if different): 40 C. A.MS. 1037 State Road 7 |
| Suite 302 Wellington FL 33414 |
| 4. Date of incorporation/qualification: 1986 Document number: N 13564 |
| 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) |
| James Krivok Esg - Dicker Krivok + Stoloff P.A |
| 1818 Australian Ave Suite 400 |
| West Palm Beach, FL 33409 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Gerstin 1 associates Content of the con |
| 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. |
| Walter Greenberg WALTER GREENBERG-TREASURER Signature of an officer 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. Significantly: Date Date Typed of Printed Name |

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