## 767745

(Re	questor's Name)	<u></u>
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

'JAN 2 0 2015 T. CARTER

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJI	
	Name of Corporation
DOCU	767745 MENT NUMBER:
The cn	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Paul Milberg
	Name of Contact Person
	Milberg Klein, P.L.
	Firm/Company
	5550 Glades Road, Suite 500
	Address
	Boca Raton, Florida 33431
	City/State and Zip Code
	PMilberg@milbergkleinlaw.com
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
Paul	Milberg561244-9461
	Name of Contact Person at (
Enclos	ed 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

S.q

CR2E045 (03/12)

## 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.
The name of the corporation: Woodmont Tract 57 Homeowners Association, Inc.
2. The principal office address: 7626 NW 87th Avenue, Tamarac, FL 33321
3. The mailing address (if different):
4. Date of incorporation/qualification: 03/30/83 Document number: 767745
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)
Katzman Garfinkel & Berger
5297 West Copans Road
Margate, Florida 33063
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Milberg Klein, P.L.  5550 Glades Road, Suite 500
5550 Glades Road, Suite 500
P.O. Box NOT acceptable
Boca Raton, Florida 33431
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.
Charles Rothman PRESIDENT CHARLES ROTHMAN 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 duites, 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 Date
If signing on behalf of an entity:  Whole the Whole Klein, J.L.  Typed or Prinled Name
* * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)