

(Requestor's Name)				
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(Ci	ty/State/Zip/Phone #	<del>f)</del>		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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## **COVER LETTER**

TO: Amendment Section Division of Corporations					
Townhouse Club Inc					
Name of Corporation					
DOCUMENT NUMBER: 708268					
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:					
Charles F Ackerson					
Name of Contact Person					
Townhouse Club Inc					
Firm/Company					
600 Kensington Place					
Address					
Wilton Manors, FL 33305					
City/State and Zip Code					
charlesackerson@msn.com /					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Charles F Ackerson 954 295-2012					
Name of Contact Person Area Code & Daytime Telephone Number					
, and the second					
Enclosed is a \$35.00 check made payable to the Department of State.					
Mailing Address: Street Address: Amendment Section Amendment Section					
Division of Corporations  Division of Corporations					
P.O. Box 6327 Clifton Building					

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0302, 617.0302, 66 provisions of sections 607.0302, 66 provisions organized for a corporation organized	l under the laws of the State of ${ t ar{\sf F}}$	lorida
	r to change its registered office or registered		lorida.
1. The name of t	the corporation: TOWNHOUSE CLUB, II	NC.	
2. The principal	office address: 600 Kensington Plac	ce Wilton Manors, FL	33305
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 12/18/1964	Document number: 70826	<u> </u>
	d street address of the current registered agent rtment of State: (If resigned, enter resigned)	t and registered office on file wi	th the
	KATZMAN CHANDLER		
	1500 W. Cypress Creek Road	Suite 408	
	Fort Lauderdale, FL 33309		FILI DEC 26
6. The name and (if changed):	d street address of the new registered agent (i	f changed) and /or registered off	ST THE DESCRIPTION OF THE PERSON OF THE PERS
	Charles F Ackerson - Treasure	er	28
	600 Kensington Place		
	P.O. Box NOT acce	eptable	
	Wilton Manors, FL 33305		
as changed will			
Such change was authorized by the	as authorized by resolution duly adopted by he board, or the corporation has been notified to the corporation has been notified.	its board of directors or by an odd in writing of the change.	officer so
11/1/8	/ \/\lambda \( \lambda \)	Charles F Ackerson	7
I hereby accept I further agree	ure of an officer or director t the appointment as registered agent and ag to comply with the provisions of all statutes f my duties, and I am familiar with and acce tis document is being filed merely to reflect that the corporation has been notified in w	gree to act in this capacity.  Trelative to the proper and come the obligation of my position	plete as revistered
(VIA		2/18/2018	
Sig	ghadire of Registered Agent	Date	
If signing on be	ehalf of an entity:		
	Typed or Printed Name		
-	••		

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