714914

(Requestor's Name)
(Address)
(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



900133441319



07/28/08--01036--009 **35.00



Reinstatement FOR RA

SP \$15

COVER LETTER

Division of Corporations SUBJECT: THE BOULEVARDS OF TAMARAC CIVIC ASSOCIATION, INC. (Name of Corporation) DOCUMENT NUMBER: 714914 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. OTTO, ESQ. (Name of Contact Person) STRALEY & OTTO, P.A. (Firm/Company) 2699 STIRLING ROAD, SUITE C. 207 (Address) FORT LAUDERDALE, FLORIDA 33312 (City/State and Zip Code) For further information concerning this matter, please call: CHARLES F. OTTO, ESQ. (Name of Contact Person)

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

TO:

Amendment Section

Reinstatement FOR RA

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 $\frac{\Gamma}{O}$ $\frac{O}{O}$ in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: The Boulevards of Tamara Civic Association 2. The principal office address: 2611 Northwest 5312 Street, Tamara CFL 33309
3. The mailing address (if different):
4. Date of incorporation/qualification: 71819108 Document number: 714914
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
none
PEGISTERED Agent Porigned: 4/21/2008
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
769 String ROUD SUITE C-207
Ft. Lauderdale, Flonda 33312
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. MICHAEL DAN IELCZYK (PRE) (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.
7/23/08
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Charles F. Otto Isa (Typed or Printed Name)

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