

715006

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : TRIPP SCOTT, P.A.
Account Number : 075350000065
Phone : (954) 525-7500
Fax Number : (954) 761-8475

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

LEISUREVILLE FAIRWAY ELEVEN ASSOCIATION, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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Help

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Leisureville Fairway Eleven Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 715006

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:

Matthew Zifrony, Esq.
Name of Contact Person

Tripp Scott, P.A.
Firm/Company

110 SE 6th Street, 15th Floor
Address

Fort Lauderdale, Florida 33301
City/State and Zip Code

kak@trippscott.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Bader at (954) 627-3717
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

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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: Leisureville Fairway Eleven Association, Inc.
2. The principal office address: 2701 East Golf Boulevard
Pompano Beach, Florida 33064
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7/25/68 Document number: 715006
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)

Becker & Poliakoff, P.A.

2255 Glades Road, Suite 300E

Boca Raton, Florida 33431

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Tripp Scott, P.A.

110 SE 6th Street, 15th Floor

P.O. Box NOT acceptable

Fort Lauderdale, Florida 33301

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.

Frank A. Brown
Signature of an officer or director

FRANK A. BROWN
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]
Signature of Registered Agent

2/24/12
Date

If signing on behalf of an entity:

Matthew Zihony
Typed or Printed 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 (8/05)

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