(Requestor's Name)	
(Address)	600058332196
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	08/10/0501027001 **35.00
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	05 AUG 10 AM 11:0 SECKLIGARY OF STA FALLAHASSEE, FLOR
	ATE RID.

Office Use Only

LAW OFFICES

## BECKER & POLIAKOFF, P.A.

630 South Orange Avenue, 3rd Floor Sarasota, Florida 34236-7504

Phone: (941) 366-8826 Fax: (941) 952-1481 FL Toll Free: (800) 282-8613

## Florida Offices

Administrative Office 3111 Stirling Road Ft. Lauderdale, FL 33312 (800) 432-7712 bp@becker-poliakoff.com

Boca Raton

Ft, Myers

Ft. Walton Beach

Hollywood

Largo

Melbourne\*

Miami

Naples

Orlando

Port Charlotte\*

Sarasota

Tallahassee

Tampa

West Palm Beach

 available for consultation by appointment only

Sarasota Kevin L. Edwards kedwards@becker-poliakoff.com

evin L. Edwards/a

August 8, 2005

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

RE: Statement of Change of Registered Office or Registered Agent or Both

for Corporations

Dear Sir/Madam:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations for Gulf Haven Owners Association, Inc., as well as check no. 5254 in the amount of \$35.00 to cover the cost of filing and the

Very truky yours,

For the Firm

return of a certified copy.

International and Affiliated Offices

New York, New York

Czech Republie

Frankfurt, Germany

Beijing, People's Republic of China

Tel Aviv, Israel

KLE/lv Enclosure

129164\_1.DOC

CONSULEGIS EEG

Member of Consulegis, an International Association of Law birms.

NETWORK OF LEADING LAW FIRMS



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

statement of cha	provisions of sections 607.0502, 617.0502, ange is submitted for a corporation organiz	ed under the laws of the State of F	lorida
in_ord	er to change its registered office or register	ed agent, or both, in the State of Fl	orida. F.S. G.
1. The name of	the corporation: Gulf Haven Owners Associate	ciation, Inc.	E T
	l office address: 5860 Midnight Pass Road	• •	T. O
Sarasota, F	L 34242	1 (4-1)	- S
3. The mailing	address (if different):		Trop.
4. Date of incor	poration/qualification: 04/14/1969	Document number: 716364	OK OF
5. The name an	d street address of the current registered ago artment of State:	ent and registered office on file wit	h the
	Jerry S. Armbruster, Esq. , Becker & Po		_
	630 S. Orange Avenue	in the second se	_
	Sarasota, FL 34236	\$2.4° "	
6. The name an (if changed):	d street address of the new registered agent	(if changed) and /or registered offi	ce
	Kevin L. Edwards, Esq.	er e e e e e e e e e e e e e e e e e e	<del>.</del>
	Becker & Poliakoff, P.A.		
	(P.O. Box NOT acceptable)	· · · · · · · · · · · · · · · · · · ·	
	630 S. Orange Avenue, 3rd Floor , Sara	sota, FL 34236	· , -
The street addr	ress of its registered office and the street a lbe identical.	ddress of the business office of its	s registered agent,
Such change wanthorized by	vas authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an ified in writing of the change.	officer so
Jud	$\mathcal{L}_{\mathcal{L}} = \mathcal{L}_{\mathcal{L}} = \mathcal{L}_{\mathcal{L}}$	Judith S (Printed or typed name and t	Posch
I hereby accep I further agree of my duties, a document is be corporation ha	t the appointment of registered agent and to comply with the provisions of all statu nd I am familiar with and accept the oblig ing filed metals to reflect a change in the us been notified in writing of this change.	l agree to act in this capacity. tes relative to the proper and com gation of my position as registered registered office address, I hereb	aplete performance A agent. Or, if this By confirm that the
	ignature of Degistered Agent)	8/4/05 (Date) / 05	
If signing on b	ehalf of an entity:		
Revin	L Edwards (Typed or Printed Name)	From the second	

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