

717265

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

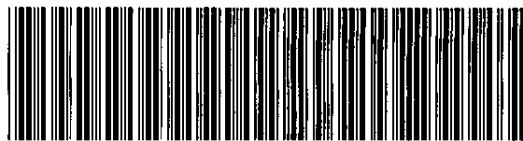
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
FALLAHASSEE, FLORIDA

R.A.

JBrown 10-3-11

*Law Offices*  
**JENNINGS & VALANCY, P.A.**  
311 SE 13<sup>TH</sup> STREET  
FORT LAUDERDALE, FLORIDA 33316  
TEL. (954) 463-1600 • FACS. (954) 463-1222

September 21, 2011

Kathy Tuna, President  
Wincast Arms North Condominium Association, Inc.  
c/o Consolidated Community Management  
7124 N. Nob Hill Road  
Tamarac, Florida 33321

Re: Change of Registered Agent

Dear Kathy:

We are changing the registered agent for Wincast Arms North from CCM to our office. This will ensure that we timely respond to any service of process received on behalf of the Association.

Enclosed herewith please find the following:

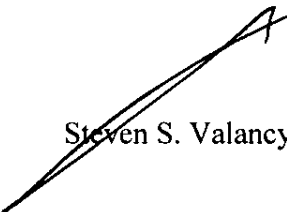
- (i) Cover Letter to Amendment Section, Division of Corporations;
- (ii) Statement of Change of Registered Office or Registered Agent or Both for Corporations; and
- (iii) Check number 007771 in the amount of \$35.00 payable to the Department of State.

Please sign and print at the highlighted portion of the Statement of Change form and send it, along with the cover letter and the check, to the Division of Corporations. Please be sure keep a copy for the Association's records. I enclose an addressed envelope for your convenience.

Feel free to contact my office if you have any questions.

Sincerely,

JENNINGS & VALANCY, PA

  
Steven S. Valancy

SSV/tjc  
Enclosures

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Wincast Arms North Condominium Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** 717265

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:

Steven S. Valancy, Esq.  
Name of Contact Person

Jennings & Valancy, PA  
Firm/Company

311 SE 13th Street  
Address

Fort Lauderdale, FL 33316  
City/State and Zip Code

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

For further information concerning this matter, please call:

Tonya Crego at ( 954 ) 463-1600  
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

**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: Wincast Arms North Condominium Association, Inc.
2. The principal office address: c/o Consolidated Community Management, 7124 N. Nob Hill Road, Tamarac, FL 33321
3. The mailing address (if different): n/a
4. Date of incorporation/qualification: 9/30/1969 Document number: 717265
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)

Consolidated Community Management

7124 N. Nob Hill Road

Tamarac, FL 33321

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

Jennings & Valancy, PA

311 S. 13th Street

P.O. Box NOT acceptable

Fort Lauderdale, FL 33316

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.

[Signature]  
Signature of an officer or director

Steve Valancy, 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 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

09-21-11  
Date

If signing on behalf of an entity:

Steven S. Valancy, Esq.

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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TALLAHASSEE, FLORIDA