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C. LEWIS

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EXAMINER

COVER LETTER

TO:

Amendment Section

Division of Corporations

SUBJECT: Lake Harbour Towers Condominium Association, Inc.

Name of Corporation

DOCUMENT NUMBER: 721996

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:

Wally Baldwin, Esq.

Name of Contact Person

The Law Offices of Stabler & Baldwin, P.A.

Firm/Company

5405 Okeechobee Boulevard, Suite # 202

Address

West Palm Beach, Florida, 3341

City/State and Zip Code

wallybaldwinlaw@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wally Baldwin at (561) 623-8423

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

Box 6327

Tallahassee, FL 32314

Street Address:

Amendment Section

Division of Corporations P.O.

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: Lake Harbour Towers Condominium Association, Inc.

2. The principal office address: 401 L	ake Shore Drive,	Lake Park, Florida 33403	
3. The mailing address (if different):_			
4. Date of incorporation/qualification:	11/3/1971	Document number: 721996	
5. The name and street address of the the Florida Department of State: (If re			with
	Wally Baldwin, I	Esa.	24.53 Fy-8
	w Offices of Pau	•	1 + <u>C</u> "
	Village Square (_	territaria. Trigo
Palm B	each Gardens, Fl	orida 33410	dii din
The name and street address of the new register	ered agent (if cha	nged) and /or registered office (if c	hanged):
Wally Baldwin, Esq., The I			
	hobee Bouleva		
	Box NOT acceptab Beach, Florida		
west rain	Deacil, Florida	135417	
Such change was authorized by resolution duly by the board, on the porporation has been notifi	ed in writing of t	oard of directors or by an officer so he change. EBSTER A. HART, PA	authorized
Signature of an officer of director		Printed or typed name and title	
I hereby accept the appointment as registered agent and a l further agree to comply with the provisions of all statute familiar with and accept the obligation of my position as change in the registered office address, I hereby confirm Signature of Registered Agent	es relative to the propregistered agent. Of	per and complete performance of my duties r, if this document is being filed merely to t	reflect a
If signing on behalf of an entity:			
Wally Baldwin			
Typed or Printed Name	_		
	ING FEE: \$35.0		
MAKE CHECKS PAYABL	E TO FLORIDA DI	EPAKTMENT OF STATE	

APPROVEU AND FILED

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL
32314 CR2E045