## 722793

| (Requestor's Name)                      |  |  |  |
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| (Address)                               |  |  |  |
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| (Address)                               |  |  |  |
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| (City/State/Zip/Phone #)                |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |
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| (Business Entity Name)                  |  |  |  |
| •                                       |  |  |  |
| (Document Number)                       |  |  |  |
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| Certified Copies Certificates of Status |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |
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SECRETARY OF STAFE TAIL AHASSEE, FLORID.

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**EXAMINER** 

## **COVER LETTER**

| TO:    | Amendment Section Division of Corporations  |  |
|--------|---|--|
| SUBJI  | JECT: Village Royale Emerald Green Asso<br>(Name of Corpo                                       | ciation, Inc.  |
|        |   |  |
|        | UMENT NUMBER: 722793  |  |
|        | nclosed Statement of Change of Registered Office/Ag   |  |
| Please | e return all correspondence concerning this matter to t   | he following:  |
|        | Peter C. Mollengarden   |  |
|        | (Name of Contact  | Person)  |
|        | Katzman Garfinkel Rosenbaum   |  |
|        | (Firm/Compa   | iny)   |
|        | 250 Australian Avenue South, Suite  |  |
|        | (Address)   |  |
|        | West Palm Beach, FL 33401<br>(City/State and Zi   | ip Code)   |
| For fu | urther information concerning this matter, please call:   |  |
| Peter  | r C. Mollengarden   | 653-2900   |
|        | (Name of Contact Person)  | (Area Code & Daytime Telephone Number)   |
| Enclos | osed is a \$35.00 check made payable to the Departmen   | t 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   |
| in order to change its registered office or registered agent, or both, in the State of Florida.   |
| 1. The name of the corporation: Village Royale Emerald Green Association, Ir  |
| 2. The principal office address: 2600 N.E. First Lane, Room 300,  |
| Bounton Brach, FL 33435   |
| 3. The mailing address (if different):  |
| 4. Date of incorporation/qualification: $2/29/72$ Document number: $722793$   |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  |
| Connie Roth   |
| 2600 NE 1st Lane  |
| Boynton Beach, FL 33435   |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):   |
| KATZMAN GARFINKEL ROSENBAUM   |
| 250 Australian Avenue South, Suite 500  |
| (P.O. Box NOT acceptable)  West Palm Beach, FL 33401  |
| vvest Fami Beach, FL 33401  |
| 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.   |
| Connie Roth-President/Treasurer (Signature of an officer or director)  Connie Roth-President/Treasurer  |
| I hereby accept the appointment as registered agent and agree to act in this capacity.<br>I further agree to comply with the provisions of all statutes relative to the proper and complete performance<br>of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this<br>document is being filed merely to reflect a change in the registered office address, I hereby confirm that the<br>corporation has been notified in writing of this change. |
| (Signature of Registered Agent) (Date)  |
| If signing on behalf of an entity:  |
| Peter C. Mollengarden, Esquiré KATZMAN GARFINKEL ROSENBAUM  |
| (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)