

725252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

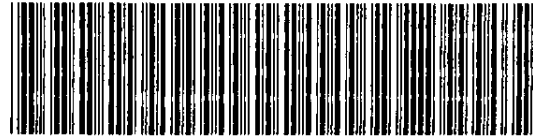
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Change

03/24/11--01030--001 **35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ASR
4/14/11

**00789, 00611, 00671*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Naranja Lakes Condominium No. Five, Inc.
Name of Corporation

DOCUMENT NUMBER: 725252

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:

Elizabeth Lopez, Esq.
Name of Contact Person

Paul A. McKenna and Associates, P.A.
Firm/Company

1360 South Dixie Highway Suite 100
Address

Coral Gables, FL 33146
City/State and Zip Code

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

elyopmcklaw.com

For further information concerning this matter, please call:

Elizabeth Lopez, Esq. at (305) 662-9908
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 28, 2011

APR 04 2011

Elizabeth Lopez, Esq.
Paul A. McKenna and Associates, P.A.
1360 South Dixie Highway, Ste 100
Coral Gables, FL 33146

SUBJECT: NARANJA LAKES CONDOMINIUM NO. FIVE, INC.
Ref. Number: 725252

We have received your document for NARANJA LAKES CONDOMINIUM NO. FIVE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 611A00007372

RECEIVED
11 APR 14 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Naranja Lakes Condominium No. Five, Inc.
2. The principal office address: 1360 SOUTH DIXIE HIGHWAY, SUITE 100
Coral Gables, FL 33146
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/10/1973 Document number: 725252
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)

Marlene Leon-Rubido, Esq.

6780 Coral Way

Coral Gables, FL 33155

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

Paul A. McKenna and Associates, P.A.

1360 South Dixie Highway Suite 100

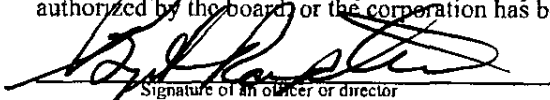
P.O. Box NOT acceptable

Coral Gables, FL 33146

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TALLAHASSEE, FLORIDA

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 of an officer or director

BRYANT REYSTER PRES.
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 of Registered Agent

4/7/11
Date

If signing on behalf of an entity:

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