

727281

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200181851632

06/14/10--01037--006 **35.00

FILED
10 JUN 14 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ANDY 6/16/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Castle #14 Condominium
Name of Corporation

DOCUMENT NUMBER: 727281

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:

Sharon Kasen
Name of Contact Person

Benchmark Property Mgmt. Inc.
Firm/Company

7932 Wiles Road
Address

Coral Springs, FL 33067
City/State and Zip Code

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

For further information concerning this matter, please call:

Sharon Kasen at (954) 344-5353
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: Castle # 14 Condominium, Inc.
2. The principal office address: 90 Benchmark Property Mgmt.
7932 Willes Road, Coral Springs, FL 33067
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 8/1973 Document number: 727281

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)

Straley + Otto, P.A.
2699 Stirling Road #C-207
Ft. Lauderdale, FL ~~33300~~ 33312

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUN 14 PM 1:26

FILED

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

Kaye + Bender, P.A.
1200 Park Central Blvd. South
Pompano Beach, FL 33064

P.O. Box NOT acceptable

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] PRESIDENT
Signature of an officer or director

SANDY ALTER 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

June 10, 2010
Date

If signing on behalf of an entity:

Robert L. Kaye, 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