

729347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Change

10/20/06--01023--002 **35.00

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2006 NOV 22 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

for
11/22/06

*00789, 00721, 00672

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Briar Bay Townhouse H.O.A.
(Name of Corporation)

DOCUMENT NUMBER: 729347

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:

Stephen E. Swits
(Name of Contact Person)

Land Cap Property Services
(Firm/Company)

13800 SW 144 ave rd
(Address)

miami, FL 33186
(City/State and Zip Code)

For further information concerning this matter, please call:

Stephen E. Swits at (305) 251-2234
(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

October 26, 2006

Stephen E. Suits
Land Cap Property Services
13800 SW 144 Ave. Rd.
Miami, FL 33186

SUBJECT: BRIAR BAY TOWNHOUSE HOMEOWNER'S ASSOCIATION, INC.
Ref. Number: 729347

We have received your document for BRIAR BAY TOWNHOUSE HOMEOWNER'S ASSOCIATION, 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):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

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

Annette Ramsey
Document Specialist

Letter Number: 506A00063646

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS

FILED

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.

2006 NOV 22 PM 4:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the corporation: Briar Bay Townhouse Homeowner's Association, Inc.
2. The principal office address: 13800 SW 144 Ave Rd
Miami, FL 33186
3. The mailing address (if different): _____
4. Date of incorporation/qualification: _____ Document number: 729347
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
C.T. Corporation System
1200 S. Pine Island Road
Plantation, FL 33324

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

Stephen E. Svits
13800 SW 144 Ave Rd
(P.O. Box NOT acceptable)
Miami, FL 33186

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)

Robert H. Feltman
(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)

9-21-06
(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

CR2E045 (8/05)