## 732133

(Re	questor's Name)					
(Ad	dress)					
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(Cit	y/State/Zip/Phone	e #)				
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Building Three Of Racquet Club Apts At Bonav. 6 Con Name of Corporation								
DOCUMENT NUMBE	r: 73213	33						
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:								
_	-	_						
	Tony Piracci Name of Contact Pe	<u> </u>						
	Name of Contact Pe	erson						
	Alliance Property Systems							
	Firm/Company							
	P.O. Box 19439							
	Address							
	Plantation, FL 33	3318						
	City/State and Zip C	Lode						
	tpiracci@allpropsys	s.net						
E-ma	ail address: (to be used for future a	nnual report notification)						
For further information o	concerning this matter, please call:							
Ta	nu Biroosi	054 470 4700 40						
Name of	ny Piracci at (	954 ) 473-4733 ext 2 Area Code & Daytime Telephone Number						
Enclosed is a \$35.00 che	ck made payable to the Department of	f State.						
	Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations						
	P.O. Box 6327	Clifton Building						
	Tallahassee FL 32314	2661 Executive Center Circle						

Tallahassee, FL 32301

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

Pursuant to the	e provisions of s	ections 607.0502, 6.	17.0502, 607.150	98, or 617.1508,	Florida Statutes,
this statement of Florida		nitted for a corporation to change its register	_	-	
of Florida.		_	-	•	_
1. The name of	the corporation:	Building Three of Ra	cquet Club Apartn	ents at Bonavent	
2. The principal	l office address:_	1133 South Universit	y Drive #211		HSSOCIETION INC
		Plantation, Florida 33	324		<u> </u>
3. The mailing	address (if differ	ent): P.O. Box 19439			6 S.C.
		Plantation, Flor	da 33318		e The
4. Date of incor	poration/qualific	eation:3/13/1975	Docum	nent number:7	32133
	rtment of State:	of the current register	ed agent and regi	stered office on	file with the
	Alliance Proper	ty Systems			<b>-</b>
	1133 South Un	iversity Drive - Suite 2	11		
	Plantation, Flor	ida 33324			_
6. The name a changed):	nd street addres: Katzman Garfin	s of the new register	red agent (if char	nged) and /or re	gistered office (if
	1501 Northwest	49th Street, Suite #20	2		_
	<del></del>	(P.O. Box or personal mai	lbox NOT acceptable)		_
	Fort Lauderdale	, Florida 33309			
The street addragent, as chang	ess of its registe ed will be ident	red office and the strical.	eet address of th	e business office	e of its registered
Such change wauthorized by t	as authorized by he board, or the	resolution duly ado corporation has been	pted by its board i notified in writi	of directors or b	by an officer so e.
` `	r, chairman or vice chai		Monse (Printed o	r typed name and ritle)	VV
I hereby accept I further agree performance of registered ager office address,	t the appointmen to comply with a f my duties, and ut—Or, if this do I hereby confirm	nt as registered agen the provisions of all Lam familiar with a cament is being filed in that the cyrporatio	t and agree to ac statutes relative nd accept the obl merely to reflec n has been notifi	t in this capacity to the proper an ligation of my po t a change in the ed in writing of	y. d complete osition as e registered this change.
				9/20/01 (Date)	
	Signature of Registered	Agent)		(Date)	
If signing on beha Leigh C. Katzm	•		Attorney		
	Typed or Printed Name	<del></del>	- Attorney	(Capacity)	<del></del>

\* \* \* FILING FEE: \$35.00 \* \* \*