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- Fort Lauderd	ale, Florida 33		
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August 25, 2006

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re:

Gabriel Towers Condominium Association, Inc.

Change of Registered Agent

Dear Sir / Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations which has been properly filled out by this office. Furthermore, enclosed please find a check made payable to the Department of State in the amount of \$35.00. Should you require any further information or documentation with respect to the Change of Registered Agent for the above referenced corporation, please contact me at the number listed below.

Sincerely,

Ferrenc. Korr, Esq.
Managing Partner

FLK:vt Enclosure

cc:

Board of Directors

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

	ne provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508,		
this statement	of change is submitted for a corporation organized under the laws of thein order to change its registered office or registered agent, or	•	
of Florida.	in order to change as registered office or registered agent, or	boin, in the state	
1. The name of	f the corporation: Gabriel Towers Condominium Association, Inc.		
2. The principa	al office address:	Beal 71.3306	
3. The mailing	address (if different):		
4. Date of inco	rporation/qualification: 11/30/1976 Document number: 7	37400	
	nd street address of the current registered agent and registered office on a sartment of State:	file with the	
	Paul Shapiro		
	2711 Treasure Cove Circle	_Z0 2	
	Fort Lauderdale, Florida 33312		
6. The name and street address of the new registered agent (if changed) and /or registered office changed): Katzman & Korr, P.A. 1501 Northwest 49th Street, Suite 202			
	(P.O. Box or personal matibox NOT acceptable) Fort Lauderdale, Florida 33309	22 10A	
The street addragent, as chang	ress of its registered office and the street address of the business office ged will be identical.	of its registered	
OFF O	As authorized by resolution duly adopted by its board of directors or be the board, or the corporation has been notified in writing of the change Theresa A. Worki's the chairman of vice chairman of the board) Theresa A. Worki's (Printed or typed name and life)	4	
l further agree performance o	t the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and f my duties, and I am familiar with and accept the obligation of my pour. Or, if this document is being filed merely to reflect a change in the I he eby confirm that the corporation has been notified in writing of t	d complete	
	Smature (Registered Agent) August 25, 2 (Date)	006	
Former	If of an entity: \[\frac{1}{2} \frac{1}{	C, P.M.	
•	* * * FILING FEE: \$35.00 * * *		
.—	MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314		