

Hawaiian Gardens Phase V Hawaiian Gardens Phase V 1e) Hawaiian Gardens Phase V 1e) Lauderdale Lakes, FL 33319 Lauderdale Lakes, FL 33319
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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03/21/08--01028--016 **35.80

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS	
rursuant 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: Hawaijn gardens Phase V Association, Inc.	• · · ·
2. The principal office address: 4800 N. W. 35th St Lauderdale Laves, FL 33319-5377	-
3. The mailing address (if different):	-
4. Date of incorporation/qualification: 1/20/1978 Document number: 74173 \$ 8	• ,, • ,
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	1
Woliner, Lisa A., Esq.	
3111 Stirling Road	3
Ft Landerdale, FL 33312	-
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Enc J. goldman P.A. clo Hawaiin Jardens Phase V Associate	10A 7
Advocate Building 1st Floor	
315 SE 71 St (P.O. Box NOT acceptable)	
ft laucher diell, the 33301	
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.	
TiBlela PIERBE BLONDIN PROS	17
I hereby accept the appointment as registered agent and agree to act in this capacity,	
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 if am familiar with and accept the obligation of my position as registered agent. Or, if this document is heigh 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.	
3/14/08	
(Date)	
If signing on behalf of an entity:	
(Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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