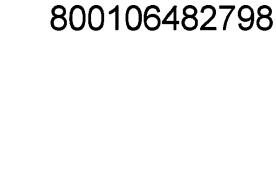
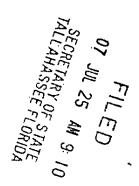
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(Re	equestor's Name)		
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COVER LETTER

SUBJECT: Golden Lakes Property Owners Association, Inc. (Name of Corporation) DOCUMENT NUMBER: 743055 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: Martin P. Heise (Name of Contact Person) Golden Lakes Property Owners Association, Inc. (Firm/Company) 2200 NW 2 Avenue, Suite 220 (Address) Boca Raton, FL 33431 (City/State and Zip Code) For further information concerning this matter, please call: 561 997-0045 x-203 (Area Code & Daytime Telephone Number) **Bettina Smoot** (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Amendment Section Street Address: **Amendment Section Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statt nge is submitted for a corporation organized under the laws of the State of <u>Flo</u> r to change its registered office or registered agent, or both, in the State of Flori	rida		
1. The name of t	he corporation: Golden Lakes Property Owners Association, Inc.			
2. The principal	office address: 2200 NW 2 Avenue, Suite 220, Boca Raton, FL 33431		-	
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 05/30/1978 Document number: 743055			
	street address of the current registered agent and registered office on file with the truent of State:	ne		
	Martin P. Heise			
•	947 Clint Moore Road			
	Boca Raton, FL 33487	SEI	07	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office	CRETAR) LAHASS	JUL 25	<u> </u>
	Martin P. Heise	100 P). ≩	
	2200 NW 2 Avenue, Suite 220	S TATE LORID	<u>ب</u>	
	(P.O. Box NOT acceptable) Boca Raton, FL 33431	Dri A	5	
n -	ess of its registered office and the street address of the business office of its rebe identical.		agent	t,
Such change was authorized by (as authorized by resolution duly adopted by its board of directors or by an off beboard, of the corporation has been notified in writing of the change.	icer so		
(Signati	Martin P. Heise, (Printed or typed name and title)	r		
I hereby accept I further agree of my duties, ar document is be configuation has	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 comple ad I am familiar with and accept the obligation of my position as registered a ing filed merely to reflect a change in the registered office address, I hereby of the peen notified in writing of this change.	ete perfo gent. Oi confirm t	rmand r, if th hat th	ce is e
Mar	gnature of Registered Agent) 72207 (Date)	_		
If signing on be	chalf of an entity:			
Martin P. He	Pise Typed or Printed Name)			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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