

744111

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

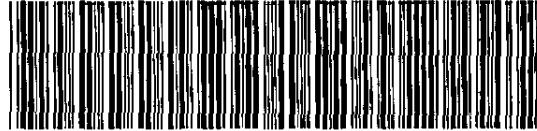
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R. A. Change
LFG
5-10-05

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bent Tree Center Association, Inc
(Name of corporation)

DOCUMENT NUMBER: 744111

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:

John Maher
(Name of contact person)

Bent Tree Center Association, Inc
(Firm/Company)

13831 SW 59th, Suite 101B
(Address)

Miami, FL 33183-1145
(City/state and zip code)

For further information concerning this matter, please call:

John Maher at (305) 380-9020
(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
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 23, 2005

JOHN MAHER
BENT TREE CENTER ASSOCIATION, INC.
13831 SW 59TH ST., SUITE 101B
MIAMI, FL 33183-1145

SUBJECT: BENT TREE CENTER ASSOCIATION, INC.
Ref. Number: 744111

We have received your document for BENT TREE CENTER 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):

The registered agent must sign accepting the designation.

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 405A00019806

returned 4/20/05

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

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.

1. The name of the corporation: Bent Tree Center Association, Inc.
2. The principal office address: 13831 SW 59 St, Suite 101B
Miami, FL 33183-1145
3. The mailing address (if different): _____

4. Date of incorporation/qualification: August 1978 Document number: 744111

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Stephen Staley
3990 Sheridan St, Suite 101
Hollywood, FL 33021

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TALLAHASSEE, FLORIDA

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

David Kobrin
8900 SW 107 Ave, Suite 206
(P.O. Box NOT acceptable)
Miami, FL 33176

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.

John A. Maher
(Signature of an officer or director)

John A. Maher, President
(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)

4/13/08
(Date)

If signing on behalf of an entity:

David Kobrin
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE