

744719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

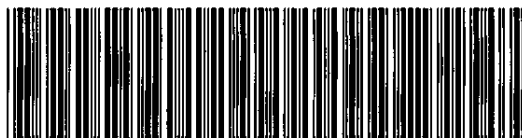
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

6-11-09



700156382927

06/09/09--01022--017 **35.00

FILED

2009 JUN 9 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PA
Chong

[Signature]

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THE PINES OF DELRAY NORTH ASSOCIATION INC
Name of Corporation

DOCUMENT NUMBER: 744 719

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:

RODGER KOURIM
Name of Contact Person

PHOENIX MANAGEMENT SERVICES
Firm/Company

1431 N.W. 18 AVENUE
Address

DELRAY BEACH, FL 33445
City/State and Zip Code

MGR PINES@BELL SOUTH.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RODGER KOURIM at (561) 278-1212
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: THE PINES OF DELRAY NORTH ASSOCIATION INC
2. The principal office address: 1431 N.W. 18 AVENUE
DELRAY BEACH, FL 33445
3. The mailing address (if different): _____
4. Date of incorporation/qualification: OCT. 25, 1978 Document number: 744719
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
DAVID C. ROSENTHAL % PHOENIX MGMT
3082 JOE ROAD
LAKE WORTH, FL 33445

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

JAMES FENLON
1431 N.W. 18 AVE.
DELRAY BEACH, FL 33445

P.O. Box NOT acceptable

2009 JUN -9 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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.

Signature of an officer or director

JAMES FENLON, 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 of Registered Agent

6/1/09
Date

If signing on behalf of an entity:

James Fenlon
Typed or Printed Name

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