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## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

January 5, 2009

COUNTRY CLUB APTS., BLDG. 1 A C/O CONSOLIDATED COMMUNITY MANAGEMENT 10034 W. MCNAB RD, TAMARAC, FL 33321

SUBJECT: BUILDING 1A OF COUNTRY CLUB **APARTMENTS** BONAVENTURE 32 CONDOMINIUM ASSOCIATION, INC.

Ref. Number: 745453

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

> **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314.

Please return a copy of this letter to ensure your money is properly credited.

Please return your check with a note stating what the money is intended for.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 009A00000045

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 22, 2009

COUNTRY CLUB APTS., BLDG. 1 A C/O CONSOLIDATED COMMUNITY MANAGEMENT 10034 W. MCNAB RD, TAMARAC, FL 33321

FEB 0 3 2009

SUBJECT: BUILDING 1A OF COUNTRY CLUB APARTMENTS AT BONAVENTURE 32 CONDOMINIUM ASSOCIATION, INC.

Ref. Number: 745453

We have received your document for BUILDING 1A OF COUNTRY CLUB APARTMENTS AT BONAVENTURE 32 CONDOMINIUM 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 document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 709A00002364

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## 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, the 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	tda .	i
1. The name of the corporation: Building 1A of Country Clob Apt at	Boxing 32 C	zande zande
2. The principal office address: 10034 W Mc Nab Koad Tam	orac.	<u>- 1</u> -し・
3. The mailing address (if different):	······································	<del>-</del> 
4. Date of incorporation/qualification: 8/8/1979 Document number: 74545	3	- -
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	SECR	33 E0
David Schottenfeld PA.	HASS	8 0
17520 NW 5th Street, Suite 203	EE'F	PK
Fort Lauder dale, 171 33311	STAT	64:2
6. The name and street address of the new registered agent (if changed) and for registered office (if changed):	<b>©</b> mi ≯	Ġ
BROUGH, CHADROW & LEVINE, P.A.		
1900 NORTH COMMERCE PARKWAY		
(FO. Bax NOT acceptable) WESTON, FL 33326		
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		
Ruth 1 SUTZ Rith A. Saltz-Presider	+	
[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 affice address, I hereby confirm that the corporation has been patified in writing of this change.		
2/2/09		
(Signature of Registered Agent) (Date)  If signing on behalf of an entity:		
MICHAEL S. CHADOW, ESQ. FOR BROVEN, CHADOW & VENNE, P.A.		
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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

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