745990

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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Capri E association, Inc. Name of Corporation				
DOCUMENT NUMBER: 745 99 C				
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:				
Patricia LaBerge Hartley, Esq.				
Name of Contact Person				
Hartley & Morton, Atty, at Law Firm/Company				
Tutti Company				
800 Villago Squaro Crossing Suito 222				
800 Village Square Crossing Suite 222 Address				
Palm Beach Gardens, Fl. 33410				
City/State and Zip Code				
LRoman@thecontinentalgroupinc.com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Linda Roman at (561) 989-5020				
Linda Roman at (561) 989-5020 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 Statement of change is submitted for a corporation organized under the laws of the State of Floring Statement of Change is submitted for a corporation organized under the laws of the State of Floring Statement of Change is submitted for a corporation organized under the laws of the State of Floring Statement of Change is submitted for a corporation organized under the laws of the State of Floring Statement of Change is submitted for a corporation organized under the laws of the State of Floring Statement of Change is submitted for a corporation organized under the laws of the State of Floring Statement of Change is submitted for a corporation organized under the laws of the State of Floring Statement of Change is submitted for a corporation organized under the laws of the State of Floring Statement of Change is submitted for a corporation organized under the laws of the State of Floring Statement of Change is submitted for a corporation organized under the laws of the State of Floring Statement of Change is submitted for a corporation organized under the laws of the Statement of Change is submitted for a corporation of the Change is submitted for the Change is submitted fo	rida	_
in order to change its registered office or registered agent, or both, in the State of Flori	da.	
1. The name of the corporation: Capri E Association, Inc.		
2. The principal office address: The Continental Group, Inc.		
6300 Park of Commerce Blvd Boca Raton, FL 3348	<u> </u>	
3. The mailing address (if different):		
4. Date of incorporation/qualification:02/16/1979 Document number:	745990	
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)	ne	
Hilley & Wyant-Cortez, P.A.		
860 U.S. Highway 1 Suite 108		
N. Palm Beach, FL 33408 US		-
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	11 July 15	141503141 1503141
Hartley & Morton, Attorneys at Law, P.A.		22
800 Village Square Crossing Suite 222	2	
P.O. Box NOT acceptable		
Palm Beach Gardens, FL 33410	от Сп	; ;
The street address of its registered office and the street address of the business office of its reas changed will be identical.	gistered age	mt,
Such change was authorized by resolution duly adopted by its board of directors or by an off authorized by the board, or the corporation has been notified in writing of the change.	icer so	
Signature of an officer or director 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 comple of my duties, and I am familiar with and accept the obligation of my position as registered adocument is being filed merely to reflect a change in the registered office address, I hereby corporation has been notified in writing of this change.	zte performa gent. Or, if i confirm that	nce this the
Hariua X. Mully 6-06-11 Signature of Registered Agenti		_
If signing on behalf of an entity:		
Patricia LaBerge Hartley Typed or Printed Name		
* * * FILING FEE: \$35.00 * * *		

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