

746632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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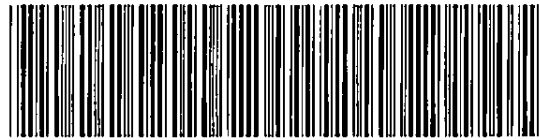
(Business Entity Name)

(Document Number)

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9/25/2025

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BENT TREE VILLAS EAST CONDOMINIUM ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: 746632

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:

CAROLYN CRAWFORD, PRESIDENT

Name of Contact Person

Firm/Company

4205 PEAR TREE CIRCLE

Address

BOYNTON BEACH, FL 33436

City/State and Zip Code

OFCHTVE@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

____ CAROLYN CRAWFORD _____ at (561) 596-9069
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ROBERT L. KAYE, B.C.S.*
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Serving clients throughout Florida

REPLY TO:

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o FLORIDA SUPREME COURT
CERTIFIED MEDIATOR

♦ BOARD CERTIFIED SPECIALIST IN
CONDOMINIUM AND PLANNED
DEVELOPMENT LAW

o BOARD CERTIFIED SPECIALIST
IN CONSTRUCTION LAW

August 4, 2025

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Bent Tree Villas East Condominium Association, Inc.

Dear Sir/Madam

Enclosed please find a Cover Letter and Statement of Change of Registered Agent form regarding Bent Tree Villas East Condominium Association, Inc. (Document No.: 746632). Also enclosed is a check in the amount of \$35.00 to cover the cost of filing the registered agent change with the Division.

If you have any questions, please do not hesitate to contact the undersigned.

Warmest Personal Regards,

KAYE BENDER REMBAUM, P.L.


Jeffrey A. Rembaum, Esq.
For the Firm

JAR/tr
Enclosures

BROWARD COUNTY:
1200 PARK CENTRAL BLVD, SOUTH
POMPAHO BEACH, FL 33064
TEL: 954.928.0680 FAX 954.772.0319

SEMINOLE COUNTY:
855 E. SR 134, SUITE 2209
WINTER SPRINGS, FL 32708
TEL: 321.490.7565

HILLSBOROUGH COUNTY:
1214 N. WESTSHORE BLVD, SUITE 409
TAMPA, FL 33607
TEL: 813.375.0791 FAX 813.252.3057

**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 VILLAS EAST CONDOMINIUM ASSOCIATION, INC.
2. The principal office address: 4205 PEAR TREE CIRCLE, BOYNTON BEACH, FL 33436
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 04/04/1979 Document number: 746632
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)

ROSENBAUM PLLC
1700 PALM BEACH LAKES BLVD., SUITE 600
WEST PALM BEACH, FL 33401

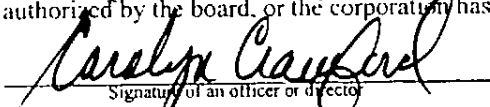
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

KAYE BENDER REMBAUM, P.L.
1200 PARK CENTRAL BLVD., SOUTH
POMPANO BEACH, FL 33064

P.O. Box NOT acceptable

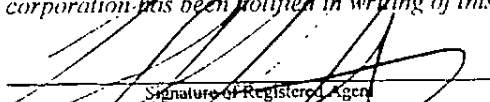
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

CAROLYN CRAWFORD, 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

8/5/25
Date

If signing on behalf of an entity:

KAYE BENDER REMBAUM, P.L.
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 (04/13)

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TALLAHASSEE, FL