740743

(Requestor's Name)
(Address)
(Address)
(
(6) 10 17 70
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
,
(Business Entity Name)
(Basiless Entry Name)
(Document Number)
Certified Copies Certificates of Status
·
Special Instructions to Filing Officer:

Office Use Only



400147892714

03/31/09--01033--002 **735.00

DIVISION OF CORPORATIONS

RA-1201048

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: The Yacht & Racquet Club of	Boca Raton Condominium Association "F", Inc.			
(Na	ame of Corporation)			
DOCUMENT NUMBER: #7	746743			
The enclosed Statement of Change of Registe Please return all correspondence concerning	ered Office/Agent and fee are submitted for filing. this matter to the following:			
Ca	armen Sierra			
	ne of Contact Person)			
_				
	cker & Poliakoff, P. A.			
	(Firm/Company)			
1850 Fountainview Blvd. Suite 103				
(Address)				
Dow				
	t St. Lucie, FL 34986 cy/State and Zip Code)			
For further information concerning this matter	er, please call:			
Carmen Sierra	at (772) 871-9320			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to	the Department of State.			
Mailing Address:	Street Address:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
Tallaliassee, FL 32314	Tallahassee, FL 32301			
	Tananassee, 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 corp	oration: The Yacht & Racquet	Club of Boca Raton Condominium Associati	on "F",Inc .	
2. The principal office address: 2697 North Ocean Boulevard				
	Boca Raton, Florida	33431-7115		
3. The mailing address				
5. The name and street	address of the current registered State: (If resigned, enter resigned Mollengarden, Peter	Document number: #746743 agent and registered office on file with the		
		Floor 33401	09	
6. The name and street ad (if changed):	Becker & Poliakoff,	ent (if changed) and /or registered office P. A. Esq.	09 MR 31 M 8: 1	
	2255 Glades Road, St (P.O. Box NOT a Boca Raton, FL 334		Ġ.	
The street address of its changed will be identic	registered office and the street	address of the business office of its registered	agent, as	
	rized by resolution duly adopted ration has been notified in writin	by its board of directors or by an officer so a g of the change.	uthorized by	
(Signature of an	n officer or director)	(Printed or typed name and title)		
I further agree to comp duties, and I am familia	ir with and accept the obligation flect a change in the registered o	d agree to act in this capacity. Ites relative to the proper and complete perfo of my position as registered agent. Or, if this Office address, I hereby confirm that the corpo	s document is	
(Signature of Reg		(Date)		
If signing on behalf of Robert Rubin	an entity: stein			

(Typed or Printed Name)