747198

(Requestor's Name)
(Address)
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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

Division of Corporations
SUBJECT: Arbor Lake at Boca West Condominium Association, Inc.
Name of Corporation
DOCUMENT NUMBER: 747198
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:
Howard Elias
Name of Contact Person
Mahogany Services, Inc.
Firm/Company
21 S.E. 5th Street, Suite 200
Address
Boca Raton, FL 33432
City/State and Zip Code
helias@mahoganyservices.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Howard Elias Name of Contact Person at (561) 997-6453 Area Code & Daytime Telephone Number
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
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1 The name of	the corporation: Arbor Lake at Boca West Condominium Association, Inc.
	office address: 21 S.E. 5th Street, Suite 200, Boca Raton, Florida 33432
3. The mailing a	address (if different): same as above
4. Date of incor	poration/qualification: 5/16/1979 Document number: 747198
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Residential Management Concepts c/o Gary Palombi
	20540 Country Club Blvd, Suite 101
	Boca Raton, FL 33434
6. The name and (if changed):	Boca Raton, FL 33434 d street address of the new registered agent (if changed) and /or registered office
	Mahogany Services, Inc. c/o Howard Elias
	21 S.E. 5th Street, Suite 200
	P.O. Box NOT acceptable Boca Raton, FL 33432
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Michignatu hereby accept	Mangion Achele Mangion President Arbor Lake The of an other of director Arbor Lake The appointment as registered agent and agree to act in this capacity. Condo. 1880
I further agree : performance of agent. Or. if th	to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
	nature of Registered Agent Date
	half of an entity:
T	yped or Printed Name

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