

748678

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

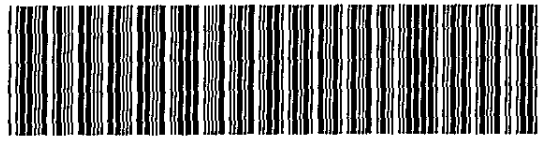
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

RA/RO change  
@ 10/2/03

**DICKER, KRIVOK & STOLOFF, P.A.**

ATTORNEYS AT LAW

1818 AUSTRALIAN AVENUE SOUTH  
SUITE 400  
WEST PALM BEACH, FLORIDA 33409

EDWARD DICKER  
JAMES N. KRIVOK  
SCOTT A. STOLOFF  
LAURIE G. MANOFF

TELEPHONE  
(561) 615-0123

FAX  
(561) 615-0128

September 19, 2003

Florida Secretary of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, Florida 32314

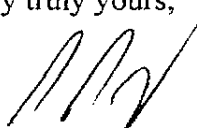
**RE: BREAKWATERS OF THE PALM BEACHES CONDOMINIUM  
ASSOCIATION, INC.  
/STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

To Whom It May Concern:

This office represents the above association. Enclosed is a Statement of Change of Registered Office or Registered Agent, or Both, which was authorized by a resolution adopted by its Board of Directors. A check in the amount of \$35.00 is enclosed for payment. Please adjust the corporation's records on file with the Division.

If you should have any questions, please contact the undersigned.

Very truly yours,

  
SCOTT A. STOLOFF  
For the Firm

SAS/  
Enclosure  
cc: Association  
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TALLAHASSEE, FLORIDA

**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 undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation is: Breakwaters of The Palm Beaches Condominium Association, Inc.
- 2. The mailing address of the corporation is: C/O Custom Property Management, 2328 S. Congress Ave., Suite 2A, W.P.B., FL. 33406
- 3. Date of incorporation/qualification: \_\_\_\_\_ Document number: #748678
- 4. The name and address of the current registered agent and office:

Complete Property Management Inc.  
4239 Northlake Blvd., Ste #D  
Palm Beach Gardens, FL. 33410

- 5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
- Dicker, Krivok & Stoloff, P.A.  
1818 Australian Avenue South, Suite 400  
West Palm Beach, Florida 33409

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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.

Bernadette Wright, President \_\_\_\_\_ 8/27/03  
 (Signature of an officer, chairman or vice chairman of the board) (Date)

Bernadette WRIGHT PRESIDENT  
 (Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

[Signature] \_\_\_\_\_ 9-19-03  
 (Signature of Registered Agent) (Date)

If signing on behalf of an entity:  
Scott A. Stoloff \_\_\_\_\_ Shareholder, Treasurer, Secretary  
 (Typed or Printed Name) (Capacity)

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