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### 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
JOHN R. SHEPPARD, JR.

TELEPHONE (561) 615-0123 FAX (561) 615-0128

August 17, 2015 (Via e-mail / jcjahn@bellsouth.net)

Board of Directors
P.G.A. Resort Community Plat of
Glenwood Homeowners Association, Inc.
631 6th Terrace
Palm Beach Gardens, FL 33418

Attention: John Jahn

Re: Change of Registered Agent Form

Dear Board Members:

Enclosed find a copy of Change of Registered Agent Form, which we have completed on behalf of the Association.

Kindly sign the enclosed form where indicated, and forward with the enclosed cover letter directly to the Florida Department of State, Division of Corporations, along with a check made payable to same in the amount of \$35.00.

If you have any questions or need anything further, please feel free to contact me.

Very truly yours,

**EDWARD DICKER** 

For the Firm

#### **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ	SJECT: P.G.A. RESORT COMMUNITY PLAT OF GLENW (Name of Corporation)	OOOD HOMEOWNERS ASSOCIATION, INC.
DOC	CUMENT NUMBER: 750782	
The er	enclosed Statement of Change of Registered Office/Agent and f	ee are submitted for filing.
Please	se return all correspondence concerning this matter to the follow	ving:
	EDWARD DICKER, ESQUIRE	
	(Name of Contact Person)	<del></del>
	DICKER, KRIVOK & STOLOFF, P.A. (Firm/Company)	<del></del>
	1818 Australian Avenue South, Sui	te 400
	(Address)	
	West Palm Beach, FL 33409 (City/State and Zip Code)	
For fu	further information concerning this matter, please call:	
EDV	DWARD DICKER, ESQUIRE at ( 561 (Area	) 615-0123 Code & Daytime Telephone Number)
Enclo	closed is a \$35.00 check made payable to the Department of Stat	<b>c</b> .
	Amendment Section A	reet Address: mendment Section
	•	ivision of Corporations
		lifton Building 661 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 Statules, this	
statement of change is submitted for a corporation organized under the laws of the State of Florida	1
1. The name of the corporation: P.G.A. RESORT COMMUNITY PLAT OF GLENWOOD HOMEOWNERS ASSOCIATION, INC.	IN.
2. The principal office address: 631 6th Terrace, Palm Beach Gardens, FL 33418	
3. The mailing address (if different): (same)	
4. Date of incorporation/qualification: 01/25/1980 Document number: 750782	
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)	:
GABRIEL & GABRIEL, LLC.	
4601 Military Trail, Suite 206	
Jupiter, FL 33458	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
DICKER, KRIVOK & STOLOFF, P.A.	
1818 Australian Avenue South, Suite 400	
(P.O. Box NOT acceptable)  West Palm Beach, FL 33409	
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.	
Robert King - Treasurer (Signature of an officer or director)  Robert King - Treasurer (Printed or typed night 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.	
Color (Signature of Registered Agent)  S/17/15 (Date)	
If signing on behalf of an entity:  Dicker Krivok & Stoloff Printed Name)  (Typed or Printed Name)	
(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)