

751156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

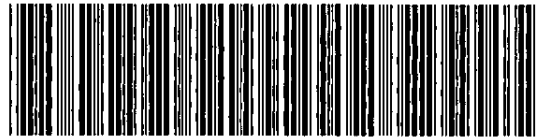
(Document Number)

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TALLAHASSEE, FLORIDA

RA Change
Taxes
12-31-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Fairway Cove Homes Association, Inc. ■
(Name of Corporation)

DOCUMENT NUMBER: 751156

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:

James Calderazzo
(Name of Contact Person)

J&L Property Management Inc.
(Firm/Company)

10191 W Sample Road Suite 203
(Address)

Coral Springs FL 33065
(City/State and Zip Code)

For further information concerning this matter, please call:

James Calderazzo at (954) 753-7966
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 10, 2008

JAMES CALDERAZZO
J & L PROPERTY MANAGEMENT INC.
10191 W SAMPLE ROAD STE 203
CORAL SPRINGS, FL 33065

SUBJECT: FAIRWAY COVE HOMES ASSOCIATION, INC.
Ref. Number: 751156

We have received your document for FAIRWAY COVE HOMES ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The new registered agent must sign below in the space provided on the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 208A00056699

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SECRETARY OF STATE
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, 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: Fairway Cove Homes Association, Inc.
2. The principal office address: c/o J&L Property Management, Inc. 10191 W Sample Road Suite 203
Coral Springs FL 33065
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/21/80 Document number: 751156
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)

Chris Tokar

9896 Fairway Cove Lane

Plantation FL 33824

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

James Calderazzo

10191 W Sample Road Suite 203

(P.O. Box NOT acceptable)

Coral Springs FL 33065

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.

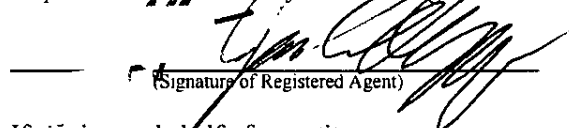


(Signature of an officer or director)

CHRISTINA TOKAR - 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)

10.23.08

(Date)

If signing on behalf of an entity:

(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)

FILED
2008 DEC 30 AM 11:25
TALLAHASSEE, FLORIDA
SECRETARY OF STATE