751180

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SEURETARY OF STATE TALLAHASSEE, FLORIDA

JAN -2 AM 5: 48

COVER LETTER

Division of Corporations SUBJECT: Galt Ocean Terrace Condominium Association, Inc. Name of Corporation 751180 DOCUMENT NUMBER: 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: DANIEL WASSERSTEIN Name of Contact Person WASSERSTEIN, P.A. Firm/Company 6501 CONGRESS AVENUE, SUITE 100 Address BOCA RATON, FL 33487 City/State and Zip Code danw@wassersteinpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DANIEL WASSERSTEIN 561) 288-3999
Area Code & Daytime Telephone Number Name of Contact Person 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

Tallahassec, FL 32301

TO:

Amendment Section

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: Galt Occ	ean Terrac	e Condominium Asso	ciation, Inc.			
2. The principal office address; 3031 NOI	RTH OCEAN	BLVD., FT. LAUDERDA	LE, FL 33308			
3. The mailing address (if different): N/A						
4. Date of incorporation/qualification:	2/21/1980	Document number:	751180			
5. The name and street address of the curren Florida Department of State: (If resigned,			ith the			
MOODY, HOLLY E						
2900 E. OAKLAND P	ARK BLVD.					
FT. LAUDERDALE, F	L 33306		_			
 The name and street address of the new re (if changed): 	gistered agent (if changed) and /or registered of	ffice			
WASSERSTEIN, P.A			_ 7			
6501 CONGRESS AV	VENUE, SUI	TE 100	NELA NELA	ار اح		
BOCA BATON EL 33	PO Box NOT ac	rceptable	HAS	JAN -		
BOCA RATON, FL 33			- SEE	\sim	i	
The street address of its registered office a as changed will be identical.				<u> </u>	•	
Such change was authorized by resolution authorized by the board, or the corporation	duly adopted by has been notifi	y its board of directors or by a led in writing of the change.	n officer so	5: 4:		
Signature of an officer or director	 -	Printed or typed hame and	ormand and	œ		
I hereby accept the appointment as registe I pather agree to comply with the provisio of my duties, and I am familiar with and ac document is being filed merely to reflect a corporation has been notified in writing of	red agent and a ns of all statute ecept the obliga change in the r this change.	ugree to act in this capacity, is relative to the proper and coution of my position as register registered office address, I here	mplete performance ed agent. Or, if this thy confirm that the			
Signature of Registered Agent	 -	1 2 high				
If signing on behalf of an entity:	. <u> </u>					

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