754155

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Na	me)
(Document Number)		
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		
		:
		!

Office Use Only



300287087143

06/21/16--01008--015 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations Orange Tree of Coral Springs Condominium Association, Inc. Name of Corporation 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: Thomas J. Tighe Name of Contact Person Tucker & Tighe, P.A. Firm/Company 800 E. Broward Blvd., Ste. 710 Address Fort Lauderdale, FL 33301 City/State and Zip Code law@tuckertighe.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Thomas J. Tighe Name of Contact Person

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

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

	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.
	the corporation: Orange Tree of Coral Springs Condominium Association, Inc.
	l office address: c/o Reliable Community Management V8th Place, Coral Springs, FL 33071
3. The mailing	address (if different):
4. Date of incor	poration/qualification: 09/15/1980 Document number: 754155
5. The name an	d street address of the current registered agent and registered office on file with the urtment of State: (If resigned, enter resigned)
	Steven S. Valancy, P.A.
	311 SW 13th Street
	Fort Lauderdale, FL 33316
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Tucker & Tighe, P.A.
	800 E. Broward Blvd., Ste. 710
	P.O. Box NOT acceptable
	Fort Lauderdale, FL 33301
The street addr as changed will	ess of its registered office and the street address of the business office of its registered agent, l be identical.
Such change wanthorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Tigu	Whank The of an officer or director Printed or typed name and title Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered agent and agree to act in this capacity. 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 apregistered ais 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.
Sig	Saff 5/12/16 enature of Registered Agent Date
Ì	ehalf of an entity:
	R TIGHE P.A.
	Typed or Printed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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