

756078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

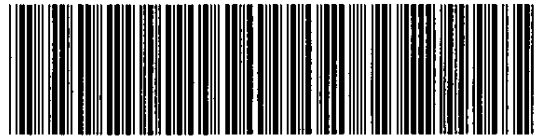
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2009 APR -8 AM 7:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TB

4/10/09

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.

March 20, 2009

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

Associated Property Management
1928 Lake Worth Road
West Palm Beach, FL 33461

Attention: Vangela Brodsky

Re: Change of Registered Agent

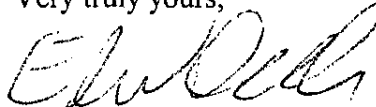
Dear Ms. Brodsky:

I have completed the enclosed Change of Registered Agent forms on behalf of the following Associations:

Woods Walk Homeowners' Association, Inc.
Hypoluxo Harbor Club Homeowners Association, Inc.
Cypress Trails Property Owners' Association, Inc.

Kindly forward the enclosed cover letter and completed forms directly to the Division of Corporations, along with a check for each Association in the amount of \$35.00, made payable to the Florida Department of State.

Very truly yours,



EDWARD DICKER
For the Firm

EAD:sao
Enclosures
woodswalk03.20L
hypoluxoharbor03.20L
cypresstrailspoa03.20L

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CYPRESS TRAILS PROPERTY OWNERS' ASSOCIATION, INC.
(Name of Corporation)

DOCUMENT NUMBER: 756078

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:

EDWARD DICKER, ESQUIRE

(Name of Contact Person)

DICKER, KRIVOK & STOLOFF, P.A.

(Firm/Company)

1818 Australian Avenue South, Suite 400

(Address)

West Palm Beach, FL 33409

(City/State and Zip Code)

For further information concerning this matter, please call:

EDWARD DICKER, ESQUIRE

(Name of Contact Person)

at (561) 615-0123

(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

**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: CYPRESS TRAILS PROPERTY OWNERS' ASSOCIATION, INC
2. The principal office address: Associated Property Manqagement, 1928 Lake Worth Road,
Lake Worth, FL 33461
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/28/1981 Document number: 756078

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)

ST. JOHN, CORE & LEMME, P.A.

1601 Forum Place, Suite 701

West Palm Beach, FL 33401

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.


(Signature of an officer or director)

Patrick Wilson
(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.

Edward Dicks
(Signature of Registered Agent)

3/18/09
(Date)

If signing on behalf of an entity:

Edward Dicker
(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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA