

764874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700186388107

10/15/10--01017--020 **35.00

10 OCT 15 PM 1:47
SECRETARY OF STATE
FILING OFFICE

RECEIVED
AND
FILED

RRP
10/15/10
TC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Grove Condominium, Section One, Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 764874

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:

Deborah Ross, Esquire

Name of Contact Person

Ross Earle & Bonan, P.A.

Firm/Company

789 S Federal Highway, Suite 101

Address

Stuart, FL 34994

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah Ross

Name of Contact Person

at (772) 287-1745
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: The Grove Condominium, Section One, Association, Inc.

2. The principal office address: 200 Sunshine Blvd, Fort Pierce, FL 34982-3901

3. The mailing address (if different): Same as above

4. Date of incorporation/qualification: 09/24/1982 Document number: 764874

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)

Levine, Jay S Esq

2500 N Military Trail, Suite 283

Boca Raton, FL 33431

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

Deborah Ross, Esquire

789 S Federal Highway, Suite 101

P.O. Box NOT acceptable

Stuart, FL 34994

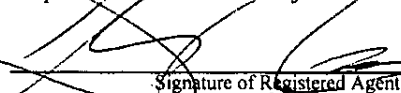
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

HELEN A. ROMAN, 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

10/12/10
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)

RECEIVED
10 OCT 15 PM 1:47
FILED
TALLAHASSEE, FLORIDA