N00000003543

02 (11)	onitestor's Nama's 5 200 /s' 07)	le
CO	NTINEN 2950 N. 28th Terra ollywood, Florida 3	ice '
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number	•
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		. [
,		
	·	
•	Office Use Or	nlv



100179958111

05/24/10--01054--026 **35.00

SECRETARY OF STATE FALLAHASSEE, FLORID/

R.A

TB

JUL - 6 2010



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 25, 2010

CONTINENTAL 2950 N 28TH TERR HOLLYWOOD, FL 33020

SUBJECT: LIDO ISLES HOMEOWNERS ASSOCIATION, INC.

Ref. Number: N0000003543

We have received your document for LIDO ISLES HOMEOWNERS 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 document must have original signatures.

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) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 010A00013160

. 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: Lido Isles Homeowners Association, Inc	
2. The principal office address: 2950 N. 28th Terrace, Hollywood, FI 33020	
1	
3. The mailing address (if different): same	
4. Date of incorporation/qualification: 6/1/2000 Document number: N0000003543	
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)	_
Brough, Chadrow & Levine, P.A.	
1900 North Commerce Parkway	
Weston, FL 33326	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	1
Bakalar & Associates, F.A.	r
150 South Pine Island Road, Suite 540 P.O. Box NOT acceptable	
P.O. Box NOT acceptable Plantation, FI 33324	
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 FEROZUL MEERALLY - TREAS URER Printed or typed name and title 2, 30 LT for Hof	
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 421200 Date	
If signing on behalf of an entity:	
Bakalar & Associates, 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
CR2E045 (8/05)

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