

N00681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

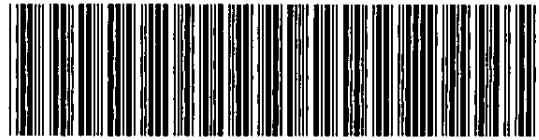
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RACchange
12/5/08
DC

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Country Park at Boca Raton Homeowners Assn
(Name of Corporation)

DOCUMENT NUMBER: N 00681

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:

None Swift or Chuck Swift
(Name of Contact Person)

Swift Management Solutions
(Firm/Company)

1750 N. UNIVERSITY Dr #205
(Address)

Coral Springs FL 33071
(City/State and Zip Code)

For further information concerning this matter, please call:

Chuck Swift at (954) 341 6340
(Name of Contact Person) (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: Countrypark at Boca RATON Homeowners' Association, Inc.
2. The principal office address: 1750 N University Dr #205
Coconut Springs FL 33071
3. The mailing address (if different): same
4. Date of incorporation/qualification: 12/83 Document number: NO0681
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)

United Community Management
11784 W Sample Ct # 103
Coconut Springs FL 33065

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DEC - 1 PM 1:10
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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- SWIFT management Solutions, Inc.
1750 N University Dr #205
(P.O. Box NOT acceptable)
Coconut Springs FL 33071

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.

Sherrill Thompson, president Sherrill B. Thompson, President
(Signature of an officer of director) (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] 10/31/08
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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