## N02000009957

| (Re                     | equestor's Name  | e)           |
|-------------------------|------------------|--------------|
| (Ac                     | ldress)          |              |
| (Ac                     | ldress)          |              |
| (Cil                    | ty/State/Zip/Pho | nne #)       |
| PICK-UP                 | ☐ WAIT           | MAIL         |
| (Bu                     | isiness Entity N | ame)         |
| (Do                     | ocument Numbe    | er)          |
| Certified Copies        | _ Certificat     | es of Status |
| Special Instructions to | Filing Officer:  |              |
|                         |                  | J. HORNE     |
|                         |                  | JAN 17 2024  |
|                         |                  |              |
|                         |                  |              |
|                         |                  |              |

Office Use Only



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12/15/23--01014--002 \*\*35.00



## COVER LETTER `

TO: Amendment Section

| Division of Corporations   |   |
|--|---|
| SUBJECT: Wilton Village (Name of Corporation   | Condominium Association, Inc.   |
| DOCUMENT NUMBER: Nº20000   | 9957  |
| The enclosed Statement of Change of Registered Or  | ffice/Agent and fee are submitted for filing.   |
| Please return all correspondence concerning this ma  | atter to the following:   |
| Mark Loshuk Name of Contact Person   |   |
| Aqua Terra Property Mana   | spement, Inc.   |
| Firm/Company   |   |
| 2737 E. Dakland Park B) Address  | lvd., Suite 203   |
| Name of Contact Person  Aqua Terra Property Mana Firm/Company  2737 E. Dakland Park Bl  Address  Ft. Landerdale, FL 33306  City/State and Zip Code |   |
| mark@ atpmi.   | com   |
| E-mail address: (to be used for future annual re   | port notification)  |
| For further information concerning this matter, plea   | se call:  |
| Mark Loshuk  | at (954) 567 - 9111 Area Code & Daytime Telephone Number  |
| Name of Contact Person   | Area Code & Daytime Telephone Number  |
| Enclosed is a \$35.00 check made payable to the Dep  | partment of State.  |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  | Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |

CR2E045 (04/13)

## 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: Wilton Village Condominium Association, Inc.  |
| 2. The principal office address: 2737 E. Galland Park Blvd., Suite 203  |
|   |
| Ft. Landerdale, FL 33306  |
| 3. The mailing address (if different): Same as above  |
| 4. Date of incorporation/qualification: 12 27 2002 Document number: NO2 00 0009957  |
| 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)  |
| (Resigned) Arline Walker  |
| (Resigned) Arline Walker  Clo A+W Property Management, 773 NW 100 Terrace   |
| Plantation, FL 33324  |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Mark Loshuk  |
| Mark Loshuk   |
| 2737 E. bahlard Park Blvd., Suite 203   |
| 2737 E. Boblard Park Blvd., Suite 203  P.O. Box NOT acceptable  Ft. Lauder dale, Ft. 33306  |
| 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.   |
| Mildus I. Royeshi NICHOLAS T. ROJESKI BOARD 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 myfely to reflect a change in the registered office address, I hereby confirm that the corporation has been nytified in writing of this change. |
| Signature of Registered Agent 12   4   23 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