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FEB 22 1012 T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Fair Field Gardens Homowrers Association
DOCUMENT NUMBER: NO300001955
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:
Name of Contact Person
Kiechbaum and Algon Law Group, LIC
8401 Lake Worth Road Suite 214
Wellington Florida 334107 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (SO) 337-1510 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

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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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: For Felci Gardens Homeowners Associations
2. The principal office address: First Choice 4755 Technology Way Suite 202, Boca Roton Florida 33431
3. The mailing address (if different):
1-10007 NOZDODIOS
4. Date of incorporation/qualification: 4. Date of incorporation/qualification: 4. Document number: NO 300004455
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)
Craig Duncan
933 NW 18 Avenue
Baca Raton FL 334860
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Kirschbaum and Alyson Law Group, LIC
84(0) Lake Worth Road Suite 214 P.O. Box NOT acceptable
Wellington FL 33460
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.
Signification CYClic Typed name and trile
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 Output
If signing on behalf of an entity: KIRSCHBAUM AND ALYSON LAW GROUD, LIC
MARA ALYSON Typed or Printed Name

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