

NO3000008515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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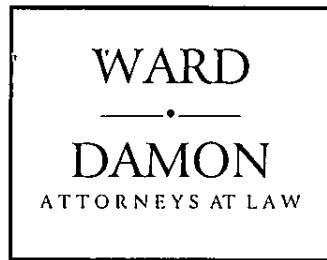
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2011 SEP 14 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B.A.

TBrown 9-14-11



4420 BEACON CIRCLE
WEST PALM BEACH, FL 33407
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Direct Dial: (561) 594-1452
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*Michael J Posner, Esquire
Board Certified Real Estate Attorney
mjposner@warddamon.com*

September 8, 2011

Florida Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL32314

Re: Egret Cove Neighborhood HOA

Dear Sir/Madam

Enclosed for filing please find a Statement of Change of Registered Resident Agent for the above referenced entity together with our check in the sum of \$35.00 representing the fee for same. Please date stamp the enclosed copy of same, showing receipt of same, and return it in the self addressed stamped envelope.

Thank you for your assistance in this matter and if you have any questions, please feel free contact me.

Very truly yours,

A handwritten signature in black ink, appearing to be "Christina Zingman", written over a horizontal line.

Christina Zingman
Legal Assistant to
Michael J Posner
For the Firm

/cz
Encls.

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2011 SEP 14 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Egret Cove Neighborhood Association, Inc.
2. The principal office address: 3900 Woodlake Blvd., Suite 309, Lake Worth Fl 33463
3. The mailing address (if different): 3900 Woodlake Blvd., Suite 309, Lake Worth Fl 33463
4. Date of incorporation/qualification: October 1, 2003 Document number: N03000008515
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

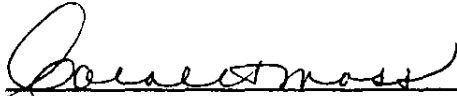
Jay Steven Levine, P.A.
3300 PGA Blvd., #530
Palm Beach Gardens, Fl 33410

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

Michael J Posner, Esq.
4420 Beacon Circle, Suite 100
West Palm Beach, Florida 33407
(P.O. Box or personal mailbox NOT acceptable)

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.

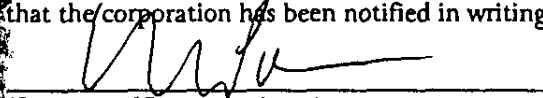


(Signature of an officer, chairman or vice-chairman of the board)

CAROL H. MOSS TREAS.

(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)

9/8/11

(Date)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. Box 6327, TALLAHASSEE, FL 32314