

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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Division of Corporations

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## REGISTERED AGENT CHANGE **BOCA CIEGA CLUB HOMEOWNERS ASSOCIATION:** CORPORATION

Certificate of Status	0
Certified Copy	0
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FEB 04 2011

O. CARROTHERS

Amendment Section

TO:

## **COVER LETTER**

Division	of Corporations			
BOC	A CIEGA CLUB HOMEOWNERS ASSOC	ATION CORPORATION		
SUBJECT:	Name of Corp	oration		
DOCUMENT N	UMBER: N04000002962	· · · · · · · · · · · · · · · · · · ·		
The enclosed Star	tement of Change of Registered Offic#A	gent and fee are submitted for filing.		
Please return all o	correspondence concerning this matter to	the following:		
	Diana Hernandez			
Name of Contact Person				
	CiraConnect			
Firm/Company				
	P.O. Box 803555			
Address				
	Dallas, TX 75380			
	City/State and Zip Code			
	RegisteredAgent@ciramail.com			
	E-mail address: (to be used for future annual report notification)			
For first or info				
	nation concerning this matter, please call			
Diana Hernandez		at (972 380-3522 Area Code & Daytime Telephone Number		
N	ame of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a \$35	5.00 check made payable to the Departme	ent of State.		
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

CR2E045 (03/12)

## 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, Florid 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 the State	f Florida
1. The name of the corporation: BOCA CIEGA CLUB HOMEOWNERS ASSOCIATION CO	PORATION
2. The principal office address: 4105 CRESCENT PARK DRIVE RIVERVIEW, FL 33578	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 03/22/2004 Document number: N0400	0002962
<ol><li>The name and street address of the current registered agent and registered office on file Florida Department of State: (If resigned, enter resigned)</li></ol>	with the
KB HOME TAMPA LLC	_
4105 CRESCENT PARK DRIVE	;
RIVERVIEW, FL 33578	- 5 5 7
6. The name and street address of the new registered agent (if changed) and /or registered (if changed):	office
C T Corporation System	_ = = = = = = = = = = = = = = = = = = =
c/o C T Corporation System, 1200 South Pine Island Road	
P.O. Box NOT acceptable Plantation, Florida 33324	- Sm 39
The street address of its registered office and the street address of the business office of as changed will be identical.	fits registered agent,
Such change was authorized by resolution duly adopted by its board of directors or by a authorized by the board, or the corporation has been notified in writing of the change.	in officer so
Michael Jones, Vice President Signature of air of director Printed or typed name and	Little
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 c performance of my duties, and am familiar with and accept the obligation of my posit agent. Or, if this document is being filed merely to reflect a change in the registered of hereby confirm that the corporation has been natified in writing of this change.	omplete ion as registered
By: 2/3/2015  Signature of Registered Agent Date	
If signing on behalf of an entity:	
Michael Jones, Assistant Secretary  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 CR2E045 (03/12)