

N04000004130

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

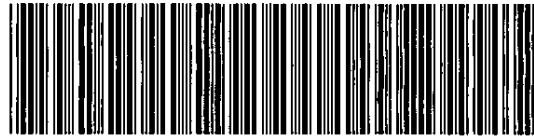
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800160833568

09/21/09--01015--017 \*\*35.00

FILED  
09 SEP 21 AM 10:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A. Chong  
C. COULLETTE

SEP 22 2009

EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Renaissance Commons Master Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N04000004130

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:

Carl E. Klepper, Jr.  
Name of Contact Person

Renaissance Commons Master Association, Inc.  
Firm/Company

1500 Gateway Blvd., Suite 200  
Address

Boynton Beach, FL 33426  
City/State and Zip Code

cklepper@compson.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carl E. Klepper, Jr. at ( 561 ) 244-6650  
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: Renaissance Commons Master Association, Inc.
2. The principal office address: c/o Prime Management , 6300 Park of Commerce Blvd., Boca Raton, FL 33487
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 04/21/2004 Document number: N04000004130
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)

Carl E. Klepper, Jr.  
980 N. Federal Highway, Suite 200  
Boca Raton, FL 33432


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

Carl E. Klepper, Jr.  
1500 Gateway Blvd., Suite 200  
P.O. Box NOT acceptable  
Boynton Beach, FL 33426

09 SEP 21 AM 10:45  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 or director

Robert D'Angelo - VPSD  
\_\_\_\_\_  
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

September 14, 2009  
\_\_\_\_\_  
Date

If signing on behalf of an entity:  
Robert D'Angelo - VPSD  
\_\_\_\_\_  
Typed or Printed Name

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