

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PALMWAY CONDOMINIUM APARTMENTS ASSOCIATION INC
Name of Corporation

DOCUMENT NUMBER: N04000006474

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:

CAROLYN GOLDBERG

Name of Contact Person

PALMWAY CONDOMINIUM APARTMENTS ASSOCIATION INC

Firm/Company

P.O. BOX 23027

Address

OAKLAND PARK, FL 33307

City/State and Zip Code

curlycpa@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carolyn Goldberg

Name of Contact Person

954

at ()

608-2797

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

FILED
DEPT. OF STATE
CORPORATIONS
19 NOV 26 PM 4:45

COVER LETTER

TO: Ms. Diane Cushing, Administrator

SUBJECT: PALMWAY CONDOMINIUM APARTMENTS ASSOCIATION INC.

DOC NO: N04000006474

Please return all correspondence to:

Palmway Condominium Apartments Association inc.

P.O. Box 23027

Oakland Park, FL 33307

Please refer to Letter Number 118A00021754, a copy of which I have attached for your convenience, and the STATEMENT OF CHANGE OF REGISTERED OFFICE OR RA OR BOTH FOR CORPORATIONS previously submitted.

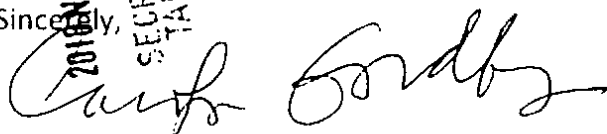
The condominium association has no physical office. All condo business is conducted through the P.O. box shown above. Therefore, I have entered the address of the Association's attorney and RA as the "principal office address" in Item 2. The address presently on file is the address of the predecessor RA who has resigned.

I have changed the "mailing address" in item 3 to the P.O. Box, as this is the address to which all correspondence should be mailed and is the mailing address already on file with the State.

As for item 5, the previous RA has already resigned. Therefore, I have entered "Resigned" as the form clearly indicates parenthetically "(If resigned, enter resigned)".

Hopefully, these changes will satisfy the State's requirements. Please feel free to call me at 954-943-9797 if there are any issues.

Sincerely,



Carolyn Goldberg Secretary, Treasurer, Director

RECEIVED
2018 NOV 29 AM 11:36
SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 8, 2018

CAROLYN GOLDBERG **2ND MAILING**
2650 NE 11TH STREET
POMPANO BEACH, FL 33062

SUBJECT: PALMWAY CONDOMINIUM APARTMENTS ASSOCIATION, INC.
Ref. Number: N04000006474

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office. ✓

Please complete number 5. ? - RESIGNED

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records. ? RA has active registration

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 118A00021754

**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: Palmway Condominium Apartments Association Inc
2. The principal office address: ~~P.O. Box 23027, Oakland Park, FL 33307~~
4300 N. UNIVERSITY Drive, Ste C-102, Sunrise, FL 33351
3. The mailing address (if different): ~~same as office address~~
P.O. Box 23027, Oakland Park, FL 33307
4. Date of incorporation/qualification: 6/30/2004 Document number: N04000006474
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

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

JEROME L. TEPPS, P.A.

4300 N. UNIVERSITY DRIVE, STE C-102

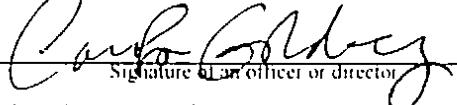
P.O. Box NOT acceptable

SUNRISE, FL 33351

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
18 NOV 26 PM 4:45

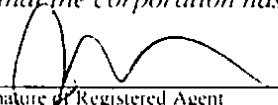
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Carolyn Goldberg, Sec, Treas, Director
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

10/2/18
Date

If signing on behalf of an entity:

JEROME L TEPPS
Typed or Printed Name

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