: (Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	
PICK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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	ACCOUNT NO. : 072100000032
	REFERENCE : 594287 7457005
	AUTHORIZATION: Tatricia quit
	COST LIMIT : \$ 35.00
ORDER	DATE: September 13, 2005
ORDER	TIME : 9:52 AM
ORDER	NO. : 594287-010
CUSTO	MER NO: 7457005
-	Mr. Vernon Strickland 1007 North Federal Highway #134 Fort Lauderdale, FL 33304
	CHANGE OF AGENT
	NAME: CRESSID COMMONS CONDOMINIUM ASSOCIATION, INC.
PLEAS	E RETURN THE FOLLOWING AS PROOF OF FILING:

EXAMINER:

NΛ	3709	р '	7

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida			
	the corporation: CRESSID COMMONS CONDOMINIUM ASSOCIATION, INC.			
2. The principal office address: 1007 M. Feller fury #61				
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: D8/25/04 Document number: N04000008412			
	i street address of the current registered agent and registered office on file with the rement of State:			
	v. strickland			
	1007 NORTH FEDERAL HWY #134			
	FORT LAUDERDALE, FL 33304			
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office			
	1201 Hays Street			
	(P.O. Box NOT acceptable)			
	Tallahassee, FL 32301			
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.			
\bigwedge	as authorized by resolution duly adopted by its board of directors or by an officer so ac board, of the corporation has been notified in writing of the change.			
I further agrée of my duties, ar document is be corporation ha	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change.			
By and	tion Service Company The A feets gnature of Registered Agent) (Date)			
If signing y	hiláo <u>faultai</u> vis s its agent			

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

(Typed or Printed Name)