

ND40000092/24

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

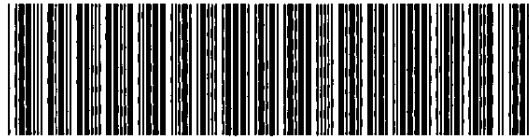
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF DISTRICT COURT
TALLAHASSEE FLORIDA

AUG 27 2012
T. ROBERTS

GELFAND & ARPE, P.A.

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BY APPOINTMENT:

COMPSON FINANCIAL CENTER
980 NORTH FEDERAL HIGHWAY
SUITE 434
BOCA RATON, FL

REPLY TO WEST PALM BEACH

August 20, 2012

Division of Corporations
Registered Agents Section
P.O. Box 6327
Tallahassee, Florida 32314

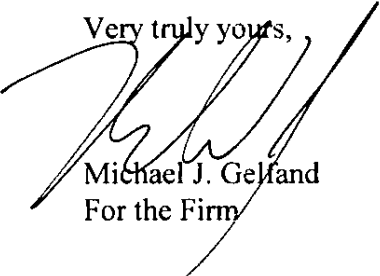
**Re: The Ponce Tower Condominium Association, Inc
/Registered Agent Change**

To Whom It May Concern:

Enclosed is The Ponce Tower Condominium Association, Inc's Statement of Change of Registered Office or Registered Agent, or Both, and Ocean Bank cashier's check number 114923 in the amount of \$35.00 payable to: Florida Department of State.

Please accept these items for filing. When processed, please confirm the change of the registered agent.

Very truly yours,


Michael J. Gelfand
For the Firm

MJG/tf

Enclosures

cc: Ms. Elizabeth McHugh

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**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 and 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: **THE PONCE TOWER CONDOMINIUM ASSOCIATION, INC.**
2. The principal office address: 1805 Ponce de Leon Boulevard, Suite 110, Coral Gables, FL 33134.
3. The mailing address (if different): Same.
4. Date of incorporation/qualification: October 4, 2004 Document number: N04000009424
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)

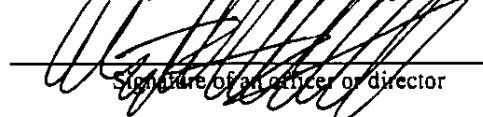
Jose A. Roche
1805 Ponce de Leon Boulevard, Apartment 512
Coral Gables, FL 33134

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

Michael J. Gelfand, Esquire
GELFAND & ARPE, P.A.
Regions Financial Tower, Suite 1220
1555 Palm Beach Lakes Boulevard
West Palm Beach, Florida 33401-2329

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

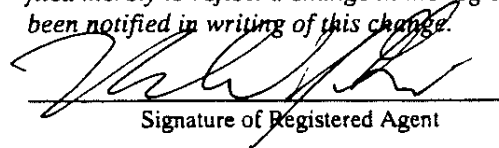
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

Elizabeth McHugh, President
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

8/20/12

Date

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

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