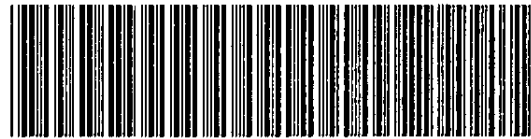


**NO5000002118**



900193326359

02/08/11--01029--014 \*\*35.00

FILED  
11 FEB - 8 PM 4: 02  
SECRETARY OF STATE  
MONTANA STATE PRINTER

*RA Change  
2-11-11  
DC*

(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

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Parkcrest Harbour Island Condominium Association  
Name of Corporation

**DOCUMENT NUMBER:** N05000002118

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:

Bennett L. Rabin, Esquire  
Name of Contact Person

Rabin Parker, P.A.  
Firm/Company

28163 U.S. 19 North, Suite 207  
Address

Clearwater, Florida 33761  
City/State and Zip Code

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

For further information concerning this matter, please call:

Ben Rabin at ( 727 ) 475-5535  
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: Parkcrest Harbour Island Condominium Association, Inc.
- 2. The principal office address: 700 S. HARBOUR ISLAND BLVD.  
TAMPA, FL 33602
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 02/24/05 Document number: N05000006218
- 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)

BRUDNY & RABIN, PA  
200 NO. PINE AVENUE, SUITE A  
OLDSMAR, FL 34677

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

RABIN PARKER, P.A.  
28163 U.S. 19 NORTH, SUITE 207  
P.O. Box NOT acceptable  
CLEARWATER, FL 33761

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 FEB - 8 PM 4: 03  
FILED

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.

Andrew Weiner  
Signature of an officer or director

Andrew Weiner President 1/31/11  
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]  
Signature of Registered Agent

2/2/11  
Date

If signing on behalf of an entity:

BENNETT L. RABIN, President Rabin Parker, P.A.  
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