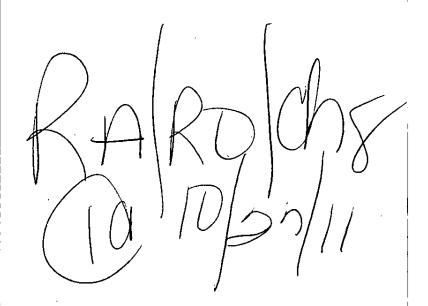
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Parkcrest Harbour Island Co.	ndominium Association, <u>l</u>
Name of C	Corporation
DOCUMENT NUMBER:N05	000002118
The enclosed Statement of Change of Registered Offic	e/Agent and fee are submitted for filing.
Please return all correspondence concerning this matte	r to the following:
Bennet	tt Rabin ntact Person
. Name of Co	ntact Person
	rker, P.A.
Firm/Co	ompany
28163 U.S. Hwy.	19 N., Suite 207
. Add	19 N., Suite 207
•	
Clearwater, F	lorida 33761
ony, out a	10 D.p 0000
ben@rabinp E-mail address: (to be used for f	earker.com
D-man address. (to be used for r	uture attitual report notification)
For further information concerning this matter, please of	zall:
Wavey Bates	at ( 727 ) 475-5535  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depart	ment of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

## 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 ange is submitted for a corporation organized under the laws of the State of er 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, Florida 33	602
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 02/24/2005 Document number:	N05000002118
	d street address of the current registered agent and registered office on file w rtment of State: (If resigned, enter resigned)	ith the
	Foriz & Degali	<del>_</del>
	4301 Anchor Plaza Parkway, Suite 300	
	Tampa, Florida 33634	<del>-</del> .
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	
	Rabin Parker, P.A.	ECRETARNISION OF C
	28163 U.S. Hwy. 19 N., Suite 207	LED CORPC 7 PM
	P.O. Box NOT acceptable	ORA
	Clearwater, Florida 33761	
The street addre as changed will	ess of its registered office and the street address of the business office of i be identical.	ts registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by ar ne board, or the corporation has been notified in writing of the change.	ı officer so
anche	w Weiner Progrew Weiner Pr	esident 19/18/2011
I hereby accept I further agree to of my duties, an document is befi corporation has	the appointment as registered agent and agree to act in this capacity. The appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and confidence of a lam familiar with and accept the obligation of my position as registered by the proper and confidence of the proper and confidence o	mplete performance ed agent. Or, if this by confirm that the
BENNE	TT L. RABIN, Prexident	

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