N05000004298

(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT N	fAIL.
(Business Entity Name)	
(Document Number)	<u>.</u>
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



100240192171

10/08/12--01021--002 **35.00

SEURETARY OF STATE

RA Change

OCT - 9 2012

T. LEWIS

COVER LETTER

ፕብ-

Amendment Section Division of Corporations

SWEET, Swann Place Homeowners Association, Inc.

Name of Corporation

N0500004298

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:

Michael Bakalar, Business Manager

Name of Contact Person

Bakalar & Associates, PA

Firm/Company

150 S. Pine Island Road, Suite 540

Address

Plantation, Fl 33324

City/State and Zip Code

swannplacehoa@yahoo.com

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

For further information concerning this matter, please call:

Michael Bakalar

954 \635-25

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
	to change its registered office of registered agent, or both, in the state of Florida. the corporation: Swann Place Homeowners Association, Inc.
	office address: 7455 Tam O Shanter Blvd, N. Lauderdale, Fl 330268
	Same
3. The mailing a	ddress (if different): same
4. Date of incorp	poration/qualification: 4/21/2005 Document number: N0500004298
	street address of the current registered agent and registered office on file with the trment of State: (If resigned, enter resigned)
	Ashcraft, William (Ashcraft Law Office, P.A.)
•	2736 NE 19th Street
	Fort Lauderdale, Fl 33068
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Bakalar & Associates, PA
	150 S. Pine Island Road, Suite 540
	Plantation, FL 33324. Tel 954-475-4244
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
Signatii	Married or typed hame and title Elva MANNING - TREASURER Printed or typed hame and title
I further agree of performance of agent. Or, if the hereby confirm	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 my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the exporation has been notified in writing of this change. Date
500	half of an energy:

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