N05000004480

(Re	equestor's Name)	
(Ad	dress)	
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12/8/09

COVER LETTER

TO: Amend

Amendment Section Division of Corporations

SUBJECT: The Preserve at the Sa	vannahs Condominium Associa
Na	me of Corporation
DOCUMENT NUMBER:	N05000004480
The enclosed Statement of Change of Register	ed Office/Agent and fee are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Jay S Nan	iteven Levine, Esq.
Jay Stev	ren Levine Law Group Firm/Company
2500 Nort	n Military Trail Sulte 283
	Address
Bocz	Raton, FL 33431 /State and Zip Code
(Salei	silawgroup.com
	ed for future annual report notification)
For further information concerning this matter, Jay Steven Levine, Esq.	
Name of Contact Person	at (561) 999-9925 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	e Department of State.
Malling Address: Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	Clifton Building
i ananassee, PL 525	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, inge is submitted for a corporation organiz r to change its registered office or register	ed under the laws of the State	of Florida	
	the corporation: The Preserve at the office address: 1801 Blue Heron Ln.,		ominium Association	Inc
3. The mailing a	ddress (if different):			
4. Date of incor	poration/qualification: 04/29/2005	Document number:	N05000004480	
	d street address of the current registered ago timent of State: (If resigned, enter resigned		e with the	
•	Resigned			
			TAPLE AFT	
6. The name an (if changed):	d street address of the new registered agent	(if changed) and /or registere	d office ARY SEE	
	Jay Steven Levine, Esq.			
	2500 North Military Trail Suite 28		— Fig. 1.:2	
	Boca Raton, FL 33431			
The street addr	ess of its registered office and the street a be identical.	ddress of the business office	of its registered agent,	
	as authorized by resolution duly adopted be board, or the corporation has been not			
Significant Control	of the other or antiture Smith	Mazella Di Printed or typed mem	Sm / fd	
I hereby occept I further ugree of my duties, a document is be corporation ha	The appointment as registered agent and to comply with the provisions of all staturd I am familiar with and accept the obliging filed merely to reflect a change in the seen notified in writing of this change.	l agree to act in this capacity tes relative to the proper an gation of my position as regi registered office address, I	, d complete performance stered agent. Or, if this hereby confirm that the	
gaste	analuse of Registered Agent	11/16/2	009	
If signing on b	chaif of an entity:	LABO		
	Steven Levine, Esq.			
	* * * FILING FE	E: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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