

N05000010022

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

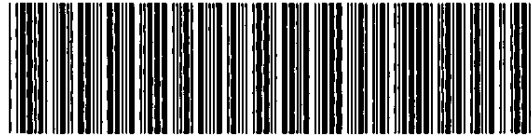
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUN - 7 AM 8:16

R.A./R.O./CHS  
@ 6/8/12

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Waterside On The Intracoastal Condo Assn, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N05000010022

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:

Leigh Hoffman

Name of Contact Person

Alliance Property Systems

Firm/Company

PO Box 19439

Address

Plantation, FL 33318

City/State and Zip Code

lhoffman@allprosys.net

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

For further information concerning this matter, please call:

Leigh Hoffman

Name of Contact Person

at ( 954 ) 473-4733 x 3  
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: Waterside on the Intracoastal Condominiums Assn, Inc.
2. The principal office address: 1133 S University Dr, Suite 211  
Plantation, FL 33324
3. The mailing address (if different): PO Box 19439  
Plantation, FL 33318
4. Date of incorporation/qualification: 9/28/2005 Document number: N05000010022
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)

Becker & Poliakoff

3111 Sterling Road

Fort Lauderdale, FL 33312

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

Law Offices of Lawrence E Blacke

3326 NE 33 Street

P.O. Box NOT acceptable

Fort Lauderdale, FL 33308

12 JUN - 7 AM 8:16  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

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.

→ John Rider  
Signature of an officer or director

John Rider, Secretary/Treasurer

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.*

→ Lawrence E Blacke  
Signature of Registered Agent

6/4/12  
Date

←

If signing on behalf of an entity:

Lawrence E Blacke

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