

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : TRIPP SCOTT, P.A.
Account Number : 075350000065
Phone : (954) 525-7500
Fax Number : (954) 761-8475

Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

REGISTERED AGENT CHANGE
VENICE ISLES CONDOMINIUM ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RECEIVED

10 NOV 29 PM 8:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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**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: VENICE ISLES CONDOMINIUM ASSOCIATION, INC.
2. The principal office address: 2775 TAFT STREET
HOLLYWOOD, FL 33020
3. The mailing address (if different): 7301 SW 57 COURT, #525
MIAMI, FL 33143
4. Date of incorporation/qualification: 07/24/2006 Document number: N06000007788

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)

PEDRO DEDESMA

590 WEST 84 STREET

HIALEAH, FL 33014

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

MATTHEW ZIFRONY, ESQ., C/O TRIPP SCOTT, P.A.

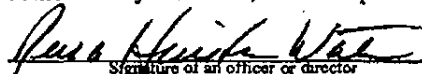
110 SE 6TH STREET, 15TH FLOOR

P.O. Box NOT acceptable

FORT LAUDERDALE, FL 33301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

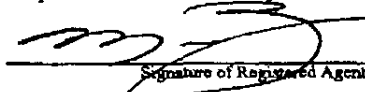
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

REESA HAIRSTON WATSON, VP

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 of Registered Agent

11/23/10

Date

If signing on behalf of an entity:

MATTHEW ZIFRONY, ESQ.

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

CR2E045 (8/05)

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