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To:

Division of Corporations

Fax Number : (850)205-0380

Account Name

: CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone

: (850)521-1000

Fax Number

(850) 558-1575

REGISTERED AGENT CHANGE

THE PALMS CLUB CONDOMINIUM ASSOCIATION, INC.

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this	
	ange is submitted for a corporation organized under the laws of the State of Floridaerror to change its registered office or registered agent, or both, in the State of Florida.	
1 The name of	the corporation: THE PALMS CLUB CONDOMINIUM ASSOCIATION, INC.	
2. The principal	l office address: 5500 Metrowest Blvd., Orlando, FL 32835	-
z, the himorpa	Totale address.	-
3. The mailing	address (if different):	-
4. Date of incor	poration/qualification: 09/19/2006 Document number: N06000009853	_
	d street address of the current registered agent and registered office on file with the ritment of State:	
	Mary Koberstein ZS 9	ارت انا
	701 Brickell Avenue, Suite 3000	<u>ن</u> 1277ء۔۔۔۔
	Miami, FL 33131	, ,
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office Corporation Service Company	Land Card
	Corporation Service Company	
	1201 Hays Street	
	(P.O. Box NOT scorptable)	
	Tallahassee, FL 32301	
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, l be identical.	:
Such change we authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
_	Dan Tucker, President	
	per of an officer or discour) (Printed or typed name and title)	
I hereby accept I fyrther agree t of my duties, an accument is bei corporation has	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 performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this was filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.	
By: WC	service Company Lucille R. Chunos Tuly 3 3007 gnature of Registered Agent)	
If signing on be	thalf of an entity:	
Michelle R. Van	noy, Assistant Vice President	
(T	(yped 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)