

NO6000009853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

called 7/17
sent 3rd for FIRE 4/9
check ?
sent check 7/17
8/10

Office Use Only



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08/10/09--01034--023 **35.00

09 JUL -6 AM 10:57

SECRETARY OF
TALLAHASSEE, FLORIDA

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OFF

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 2, 2009

THE PALMS CLUB CONDOMINIUM ASSOCIATION, INC.
5500 METROWEST BLVD.
ORLANDO, FL 32835

SUBJECT: THE PALMS CLUB CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N06000009853

We have received your document for THE PALMS CLUB CONDOMINIUM ASSOCIATION, INC. and check(s) totaling \$35.00. However, your check(s) and document are being returned for the following:

The registered agent must sign accepting the designation.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 809A00018452

**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 _____ in order 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 office address: 5500 Metrowest Blvd. Orlando, FL 32835
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 9/19/00 Document number: NC000009853

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

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

David Beckerman P.A.
7000 West Palmetto Park Road., Ste 500
(P.O. Box NOT acceptable)
Boca Raton, FL 33433

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)

ARTHUR SLAVEN
(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.

, Pres.
(Signature of Registered Agent)

7/20/09
(Date)

If signing on behalf of an entity: ...

DAVID BECKERMAN, PRES.
(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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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