

N06327

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

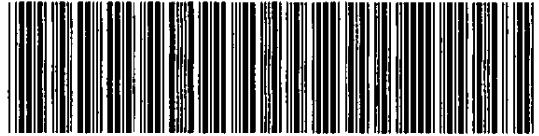
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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BA
Change

08/24/09--01013--018 **35.00

2009 AUG 24 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

BA
8/25/09

6910
Law Offices

JENNINGS & VALANCY, P.A.

311 SE 13TH STREET
FORT LAUDERDALE, FLORIDA 33316
TEL. (954) 463-1600 • FACS. (954) 463-1222

AUG 05 2009

August 4, 2009

Via Regular Mail

Players Place Townhomes, Inc.
c/o: C.C.M., Inc., Attn.: Jim Miles
10034 West McNab Road
Tamarac, Florida 33321

Re: Players Place Townhomes, Inc.

Dear Jim,

Enclosed is the Change of Registered Agent form. Please have one of the Board members sign the form and mail it, along with a check in the amount of \$35.00, payable to the Department of State to:

Amendment Section
Division of Corporations
P.O.Box 6327
Tallahassee, FL 32314

Very truly yours,

JENNINGS & VALANCY, P.A.


Steven S. Valancy

SSV:cc

Enclosures: Change of Registered Agent form

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PLAYERS PLACE TOWNHOMES, INC.
Name of Corporation

DOCUMENT NUMBER: N06327

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:

STEVEN S. VALANCY
Name of Contact Person

JENNINGS & VALANCY, P.A.
Firm/Company

311 SE 13TH STREET
Address

FORT LAUDERDALE, FLORIDA 33316
City/State and Zip Code

donna@myflalaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donna Aven at (954) 463-1600
Name of Contact Person 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: PLAYERS PLACE TOWNHOMES, INC.
2. The principal office address: _____
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/27/1984 Document number: N06327
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)

NACHMAN, IRVIN W. PA

4441 STIRLING ROAD

FORT LAUDERDALE, FLORIDA 33316

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

STEVEN S. VALANCY

311 SE 13TH STREET


P.O. Box NOT acceptable

FORT LAUDERDALE, FLORIDA 33316

FILED
2009 AUG 24 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, 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.

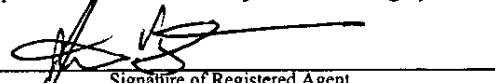


Signature of an officer or director

Frank A. Blalnick President

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

08-03-09

Date

If signing on behalf of an entity:

STEVEN S. VALANCY

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