## N 07000001113

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
. (Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800136289898

09/25/08--01031--001 \*\*210.00

OR SEP 25 PH 1:31

PA Change 10/6/08

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: HANGING REGISTERED AGENT - 6 FLORIDA CORPS (Name of Corporation)
DOCUMENT NUMBER: See Attached
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:
Daniel Kyskel =54.  (Name of Contact Person)
(Firm/Company)
7200 W. Canni Real, ste 302
Boca Roto, FL 33433 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Contact Person) at (J6) 368-077, J61-239- (Area Code & Daytime Telephone Number) 26/6
Enclosed is a \$35.00 check made payable to the Department of State.    Y   C     Street Address: Amendment Section   Amendment Section     Division of Corporations   Division of Corporations
\$2/0 Mailing Address: Street Address: Amendment Section Amendment Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Uillage Ogks of Tampa Condominium Association, Inc.
2. The principal office address: 1425 Montavil Cit cle
Temple Tellace, FL 33637
3. The mailing address (if different):
4. Date of incorporation/qualification: 1 31/07 Document number: NOT 0000 11/3
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Daniel A- Kuskel P.A
7200 W. Camino Real, Suite 303
Boca Raton, FL 33433
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Kodsi Lau Film, A.A.
(P.O. Box NOT acceptable)  (P.O. Box NOT acceptable)
FOT Lauderdale, FL 33309
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, of the corporation has been notified in writing of the change.
(Signature of an office of director)  (Signature of an office of director)  (Printed or typed name and title)
(Signature of an office of special of the composition of the compositi
9-23-08
(Signature of Registered Agent) (Date)  If signing on behalf of an entity:
Steven R. Anster. (Typed or Printed Name)

\* \* \* FILING FEE: \$35.00 \* \* \*