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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: SANTA BARBARA ESTATES EAST HOWEQUNERS ASSOCIATION, INC.

Name of Corporation

DOCUMENT NUMBER: N10000010425

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:

GARY BUDD

Name of Contact Person

CREST MANAGEMENT GROUP, INC.

6413 CONGRESS AVE., SUITE 200 Address

BOCA RATON, FL 33487
City/State and Zin Code

CCOOPER CRESTMANAGEMENT GROW. Com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary 8. Budd Name of Contact Person at (561) 994-2334 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: SANTA BARBARA ESTATES EAST HOMEOWNERS ASSOCIATION, 2. The principal office address: 6413 CONFRESS AVE., SUITE 200 ENC. BOCA RATON, FL 33487
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 2010 Document number: N10000010425
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)
BERMAN, RICHARD E 2101 W. COMMERCIAL BLVD., SUITE 280075 E FT. LANDERDALE, FL 33309
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): CREST MANA GENENT GROWP, INC. P.O. BOX NOT acceptable 6413 CONGRESS AVE., SLITE 200, BOCA RATON, FL 33481
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. Low, A. Ravit V.P.
Gary Budd Typed or Printed Name

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