N10897

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COVER LETTER

CR2E045 (8/05)

то:	Amendment Section Division of Corporations
SUBJI	ECT: Heatherwood of Boca Raton Condominium Association, Inc. (Name of Corporation)
DOCL	JMENT NUMBER: N10897
The en	closed Statement of Change of Registered Office/Agent and fcc are submitted for filing.
.Please	return all correspondence concerning this matter to the following:
	Property Manager (Name of Contact Person)
	c/o Prime Management Group (Firm/Company)
·	6300 Park of Commerce Boulevard (Address)
	Boca Raton, FL 33487 (City/State and Zip Code)
For fur	ther information concerning this matter, please call:
Jordar	at (561) 997-4045
	(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclos	ed is a \$35.00 check made payable to the Department of State.
1	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
	CROSS STATE OF STATE STATE OF THE STATE OF T

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

1. The name of	the corporation: Heatherwood of Boca Raton Condominium Association, Inc.	
2. The principal	office address: c/o Prime Management Group, 6300 Park of Commerce Boulevard, Boca Raton, FL 33	487
3. The mailing a	address (if different):	_ _
4. Date of incor	poration/qualification: 08/29/1985 Document number: N10897	_
	d street address of the current registered agent and registered office on file with the rtment of State:	
	Andrew Glen	
	6300 Park of Commerce Blvd., Boca Raton, FL 33487	L.
6. The name and (if changed):	d street address of the new resistant areas (Salamed) and (as a six and a Six	1777 1778 1878 1878 1878 1878 1878 1878
	Jay Steven Levine, Esq.	CA OF SHATER
	2500 N. Military Trail, Suite 283	1111
	(P.O. Box NOT acceptable) Boca Raton, FL 33431	
The street address changed will	ress of its registered office and the street address of the business office of its registered agent, I be identical.	
Such change was	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the comporation has been notified in writing of the change.	
(Signati	Paul D. Wallace, Jr., President (Printed or typed name and title)	
I hereby accept I further agree of my duties, an document is bei	t 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 nd I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.	
Jos Joseph (Signature)	Ignature of Registered Agent) (Date)	
U If signing on be	chalf of an entity:	
	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
CR2E045 (8/05)