

711142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2014 MAY 16 P 1:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 19 2015

[Signature]
T. DEMARCO

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Country Club Maintenance Association
Name of Corporation

DOCUMENT NUMBER: N 11142

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:

Cathy Kelly
Name of Contact Person
Country Club Maintenance Association
Firm/Company
2701 NW 64th Blvd
Address
Boca Raton FL 33496
City/State and Zip Code
Cathy@broken sound.us
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cathy Kelly at 561) 998-5813
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 3, 2014

CATHY KELLY
2701 NW 64 BLVD
BOCA RATON, FL 33496

SUBJECT: COUNTRY CLUB MAINTENANCE ASSOCIATION, INC.
Ref. Number: N11142

We have received your document for COUNTRY CLUB MAINTENANCE ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Are you wanting the Fictitious name to the registered agent or Howard M Schwartz?

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 314A00004603

RECEIVED
14 MAY 16 PM 1:59
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Country Club Maintenance Association
2. The principal office address: 2701 NW 64th Blvd
Boca Raton, FL - 33496
3. The mailing address (if different): N/A

4. Date of incorporation/qualification: 1985 Document number: N 11142

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)

Randall K Roger
621 NW 53rd St, #300
Boca Raton, FL 33487

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

President, Broken Sound Master Association
2701 NW 64th Blvd
Boca Raton, FL 33496

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.

Cathy Kelly as agent
Signature of an officer or director

Cathy Kelly G. M. as agent only
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.

Howard M Schwartz
Signature of Registered Agent

2/11/14
Date

If signing on behalf of an entity:

Howard M Schwartz, President of Broken Sound
Master Association
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 (03/12)