(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
10



600163793506

12/21/09--01031--619 \*\*35.00

## **COVER LETTER**

TO: Amendment Section Division of Corporations
COUNTRY VILLAGE CONDO ASSOCIATION OF
SUBJECT: PALM BEACH COUNTY INC.  Name of Corporation
DOCUMENT NUMBER: ~ 11178
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:
Porald A. Pierro  Name of Contact Person  Country Villoge Condo Association of  Polm Black County, Ex Inc.  Firm/Company
12346 ALT. AIA #K-7  Address  Palm Beach Gardens, FL 33410  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Powald A. Pierro at S61, 799-9657  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

CR2E045 (8/05)

## '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 Statut 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.	orda
1. The name of the corporation: Country Village Covolo Associa  2. The principal office address: 12346 ALTAIA  #K-7, Palm Beach Cavders, PL  3. The mailing address (if different): 1334	tion of Palm Beach Covaty
#K-7, Palm Beach Carders, PC	Florion
3. The mailing address (if different):	10
4. Date of incorporation/qualification: 9-19-1985 Document number: N 111	78
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)	
Harriet Freeman, Esq.	
111380 Prosperity Farms Road	Sue 204
Harriet Freeman, Esq. 111380 Prosperity Farms Road Palm Beach Gardens, FL 3341	BOEC TO THE
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	860
Robert Burr, Esq.	PM 12: 06
Robert Burr, Esq.  St. John, Cove + Lemme, PA.  1601 Forum Place, Suite 701	<b>*</b>
The street address of its registered office and the street address of the business office of its registered will be identical.	ristered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change.	
Signature of an officer or director  Signature of an officer or director  Donald 4 Diela  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 of my duties, and I am familiar with and accept the obligation of my position as registered age document is being filed merely to reflect a change in the registered office address, I hereby co-corporation has been notified in writing of this change.	e performance ent. Or, if this nfirm that the
Mobile 98. 10mm 12-11-09 Signature of Registered Agent Date	<del></del>
If signing on behalf of an entity:	
Robert B. Burl Typed or Printed Name	

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