## N15921

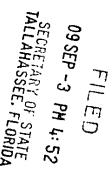
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## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: Summit Trail Homeowners Association, Inc.  Name of Corporation			
DOCUMENT NUMBER: N15921			
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:			
Chelle Konyk, Esq. Name of Contact Person			
Name of Contact Leison			
St. John, Core & Lemme, P.A.			
Firm/Company			
1601 Forum Place, Suite 701 Address			
West Palm Beach, Florida 33401  City/State and Zip Code			
City/State and Zip Code			
chelle@stjohn-core.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Chelle Konyk, Esq. at ( 561 ) 655-8994, Ext. 128  Name of Contact Person Area Code & Daytime Telephone Number			
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  Street Address: Amendment Section Division of Corporations 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Singe is submitted for a corporation organized under the laws of the State of $\underline{\ \ }$ ir to change its registered office or registered agent, or both, in the State of F	lorida
	the corporation: Summit Trail Homeowners Association, Ir	
2. The principal	office address: 1001 Summit Trail Circle, West Palm Beach, Flo	rida 33415
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 07/17/1986 Document number:	N15921
	d street address of the current registered agent and registered office on file with truent of State: (If resigned, enter resigned)	h the
	Jay Steven Levine	_
	3300 PGA Blvd., #570	_
	Palm Beach Gardens, Florida 33410	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered off	9 SEP - SECRETA
	St. John, Core & Lemme, P.A.	SSEE LE
	1601 Forum Place, Suite 701 P.O. Box NOT acceptable	PH F:
	West Palm Beach, Florida 33401	: 52 TATE ORM
	ess of its registered office and the street address of the business office of it be identical.	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an ne board or the corporation has been notified in writing of the change.	officer so
- Jan	re of an officer or director  JOAN CAIN Frinted or typed name and fi	
hereby accept If further agree of my duties, an document is bei	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 cond I am familiar with and accept the obligation of my position as registereing filed merely to reflect a change in the registered office address, I here is been notified in writing of this change.	
	Mature of Registered Agent Date	1007
If signing on be	chalf of an entity:	
Chelle T	yped or Printed Name	

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