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SECRETARY OF TORIDA

OCT - 8 2013 T. CARTER

COVER LETTER

Amendment Section Division of Corporations Ventura at Mission Bay Village Association, Inc. Name of Corporation N18939 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: Steven R. Braten, Esq. Name of Contact Person Steven R. Braten, P.A. Firm/Company 500 Gulfstream Boulevard, Suite 104 Address Delray Beach, FL 33483 City/State and Zip Code sbraten@myassociationattorney.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Steven R. Braten Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address:** Street Address:

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (03/12)* · · -

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

statement of cha	inge is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statute. ized under the laws of the State of ered agent, or both, in the State of Florida		-
		SSION BAY VILLAGE ASSOCI		I, INC.
2. The principal	office address: 15000 Buena Vent	ura Dr., Boca Raton, FL 33497	7	
3. The mailing a	address (if different): 9045 LaFontana	a Boulevard, Suite 101, Boca Rat	ton, FL	33434
4. Date of incor	poration/qualification: 1/27/1987	Document number: N18939		
5. The name and	d street address of the current registered a rtment of State: (If resigned, enter resigne			
	Steven R. Braten, Esq.			
551 SE 8th Street, 4th Floor				
	Delray Beach, FL 33483		13	SEO
6. The name and (if changed):	d street address of the new registered ager	nt (if changed) and /or registered office	SEP 30	CRETARY
	Steven R. Braten, P.A.			E-20
	500 Gulfstream Boulevard, S		44 III: W4	STAT
	P.O. Box NOT Delray Beach, FL 33483	acceptable	ŧ	DA T
	ess of its registered office and the street a be identical.	address of the business office of its regis by its board of directors or by an officer tified in writing of the change.		nt,
authorized by the	the board, of the corporation has been not	STEVE COHN, PRESIDENT		
Signate	ire of an officer or director	Printed or typed name and title		_
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and to comply with the provisions of all state my duties, and I am familiar with and a is document is being fited merely to refle that the dorporation has been notified in	d agree to act in this capacity. utes relative to the proper and complete ccept the obligation of my position as re ect a change in the registered office addi n writing of this change.	gistered ess, I	
		6/12/2013		-
	patture of Registered Agent	Date		
	chalf of an entity:			
Steven R. I	Sraten yped or Printed Name			

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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