

# N21063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

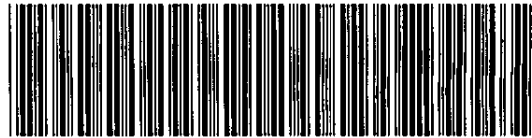
(Business Entity Name)

(Document Number)

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2017 APR 17 PM 12:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA/RO/CHG

APR 18 2017

ALBRITTON

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Manor Homes at Emerald Forest Homeowners Association, Inc.  
Name of Corporation

DOCUMENT NUMBER: N21063

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:

Pam Testa, LCAM

Name of Contact Person

C.A.M.S. Property Management

Firm/Company

1037 State Rd 7, Suite 302

Address

Wellington, Florida 33414

City/State and Zip Code

pamt@camsmanagement.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pam Testa

Name of Contact Person

at ( 561 ) 738-0061

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

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

1. The name of the corporation: Manor Homes at Emerald Forest Homeowners Association, Inc.  
2. The principal office address: 1037 State Road 7, Suite 302  
Wellington, Florida 33414  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 6/9/1987 Document number: N21063

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)

Dicker, Krivok, Stoloff, P.A.

1818 Australian Avenue South, Suite 400

West Palm Beach, FL 33409

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

Kaye Bender Rembaum, PL


1200 Park Central Blvd., South

P.O. Box NOT acceptable

Pompano Beach, FL 33064

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.

  
\_\_\_\_\_  
Signature of an officer or director

Bryan Epstein, President

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.*

  
\_\_\_\_\_  
Signature of Registered Agent

4/11/17

Date

If signing on behalf of an entity:

Jeffrey A. Rembaum, Esq.

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)

**FILED**  
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**TALLAHASSEE, FLORIDA**