## N22926

	•	
(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #/	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
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PAChange 12/17/08 H

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: BELFORT CONDOMINIUM K ASSOC (Name of Corporation)	IATION, INC.
DOCUMENT NUMBER: N22926	
The enclosed Statement of Change of Registered Office/Agent and	fee are submitted for filing.
Please return all correspondence concerning this matter to the follow	ving:
STEVEN S. VALANC (Name of Contact Person)	CY
JENNINGS & VALANCY (Firm/Company)	′, P.A.
311 SE 13TH STREE	ΞΤ
FORT LAUDERDALE, FLOF (City/State and Zip Code) For further information concerning this matter, please call:	RIDA 33316
•	4) 463-1600 Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State	<b>e.</b>
Amendment Section And Division of Corporations Division of Corporations Division 6327 Clara Tallahassee, FL 32314 26	reet Address: mendment Section ivision of Corporations ifton Building 61 Executive Center Circle allahassee, 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: BELFORT CONDOMINIUM K ASSOCIATION, INC.				
2. The principal office address: C/O SUNDANCE PROPERTY MANAGEMENT, 3275 W. HILLSBOR	ļΟ			
BOULEVARD, SUITE 312, DEERFIELD BEACH, FL 33442	-			
3. The mailing address (if different):	-			
4. Date of incorporation/qualification: 10/03/1986 Document number: N22926	-			
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)				
THE LAW OFFICES OF KATZMAN & KORR, P.A.				
1501 N.W. 49TH STREET SUITE 202				
FT. LAUDERDALE, FLORIDA 33309	, , ,;,			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
STEVEN S. VALANCY				
311 SE 13TH STREET				
(P.O. Box NOT acceptable)				
FORT LAUDERDALE, FLORIDA 33316				
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.				
Sally Romano pres.  Sally Romano pres.  (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.				
12-8-08				
(Signature of Registered Agent) (Date)				
If signing on behalf of an entity:				
STEVEN S. VALANCY (Typed or Briefed Name)				
(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 (8/05)