

N23000009523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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10/07/24--01018--003 **35.00

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2024 OCT -7 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FL

48

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Costa Pointe Homeowners Association, INC
Name of Corporation

DOCUMENT NUMBER: N23000009523

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:

Kelly Britten
Name of Contact Person

Castle Group
Firm/Company

500 S Australian Ave STE 700
Address

West Palm Beach FL 33401
City/State and Zip Code

k.britten@castlegroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patricia Jamar at (772) 538-6064
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. The name of the corporation: Costa Pointe Homeowners Association, Inc.
2. The principal office address: 1475 Centrepark Blvd. Suite 305
West Palm Beach, FL 33401
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 08/07/23 Document number: N23000009623
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)

Lemon, Jamaïne (resigned)
1475 Centrepark Blvd Suite 305
West Palm Beach, FL 33401

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

Moody, Chris
1475 Centrepark Blvd Suite 305
West Palm Beach, FL 33401

P.O. Box NOT acceptable

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.

X David Kanarek, HOA President

Signature of an officer or director

David Kanarek, HOA 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.

David Kanarek

Signature of Registered Agent

10.2.2024

Date

If signing on behalf of an entity:

David Kanarek

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 (04/13)

FILED
2024 OCT -7 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FL

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23000009523

Entity Name: COSTA POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1475 CENTREPARK BLVD., SUITE 305
WEST PALM BEACH, FL 33401

Current Mailing Address:

1475 CENTREPARK BLVD., SUITE 305
WEST PALM BEACH, FL 33401 US

FEI Number: 99-1757280

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KANAREK, DAVID
1475 CENTREPARK BLVD., SUITE 305
WEST PALM BEACH, FL 33401 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP
Name	KANAREK, DAVID	Name	DINSMORE, GARRETT
Address	1475 CENTREPARK BLVD., SUITE 305	Address	1475 CENTREPARK BLVD., SUITE 305
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401
Title	SIT		
Name	LEMON, JAMAINE		
Address	1475 CENTREPARK BLVD., SUITE 305		
City-State-Zip:	WEST PALM BEACH FL 33401		

*File amended
report*

\$ 35.00

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID KANAREK

PRESIDENT

04/23/2024

Electronic Signature of Signing Officer/Director Detail

Date