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To:

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From:

: FRANK, WEINBERG, BLACK, P.L. Account Name

Account Number : I20040000083 Phone

: (954)474-8000

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COR AMND/RESTATE/CORRECT OR O/D RESTGN

THE EAGLE CREEK AT EAGLE TRACE ASSOCIATION, INC.

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, range is submitted for a corporation organized under the laws of the State of $\frac{\text{Flor}}{\text{constant}}$ der to change its registered office or registered agent, or both, in the State of Florida.		
	f the corporation: THE EAGLE CREEK AT EAGLE TRACE ASSOCIAT	רדסש.	TNC.
1. The name of t	f the corporation:		THO:
2. The principal Florida	aloffice address: 1000 Eagle Trace Blvd. West. Coral Spri 33071	ings,	
3. The mailing a	address (if different):		
4. Date of incorp	rporation/qualification: 2/22/1989 Document number: N30818		
5. The name and Florida Depar	nd street address of the current registered agent and registered office on file with the artment of State:	, ~ *	<u>,,</u>
	Cynthia G. Whittle		
	953 University Drive		÷
	Corel Springs, FL 33071	· ·	>
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered office		
	Steven A. Weinberg, Esquire	<u>1</u> 9	m
	7805 S. W. 6th Court	F S	D
	(P.O. Box NOT acceptable)	TATE 3	
	Plantation, FL 33324	" X	
The street addre	ress of its registered office and the street address of the business office of its registe il be identical.	red ageni	٠.
Such change wa authorized by th	vas authorized by resolution duly adopted by its board of directors or by an officer the poard, or the corporation has been notified in writing of the change.	sc	
Chuston	Taluballach Christine Polemo-Wall		,
I hereby accept I further agree to of my duties, and document is beil corporation has	of the appointment as registered agent and agree to act in this capacity, to 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 complete per and tamiliar with and accept the obligation of my position as registered agent, ting filed merely to reflect a change in the registered office address, I hereby confirm the notified in writing of this change.		:e is *
ST. ST. ST.	Steven 10/4/07		
(Sig	ignature of Registered Agent) (Dair)		
If signing on bel	ehalf of an entity:		
(Ŷ	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 (\$405)