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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



## COVER LETTER

Division of Corporations SUBJECT: The Manors at Wedgewood Lake HOA, Inc. (Name of Corporation) DOCUMENT NUMBER: N35975 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: Linda Edgar (Name of Contact Person) CMC Management, Inc. (Firm/Company) (Address) Greenacres, FL 33467 (City/State and Zip Code) For further information concerning this matter, please call: Linda Edgar (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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: The Manors at Wedgewood Lake Home owner S ASSociation, Ir
2. The principal	office address: 2950 Jog Road
Greenacre	es, FL 33467
3. The mailing a	ddress (if different): Same as above
4. Date of incorp	poration/qualification: 12/27/89 Document number: N35975
	I street address of the current registered agent and registered office on file with the remainder of State:
	Scot A. Gerrish c/o CMC Management, Inc.
	2994 Jog Road, Suite B
	Greenacres, FL 33467
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Edward Dicker, Esquire
	1818 Australian Avenue South, Suite 400
	West Palm Beach, FL 33409
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was	is authorized by resolution duly adopted by its board of directors or by an officer so le board, or the corporation has been notified in writing of the change.
(S) matu	SILVIO H. PEREZ - PRESIDENT (Printed or typed name and title)
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
V Edgi	mature of Registered Agent)  (Date)
If signing on be	half of an entity:
Edward Dicl	ker, Esquire  yped or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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