

N39267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

AUG 21 2019  
CLERK

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Trowbridge B Condominium Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N39267

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:

Lillian Gallego

Name of Contact Person

Trowbridge B Condominium Association, Inc.

Firm/Company

15364 Lakes of Delray Blvd., Unit 41

Address

Delray Beach, Florida 33484

City/State and Zip Code

liliangallego@gmail.com

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

For further information concerning this matter, please call:

Andrew B. Black

Name of Contact Person

at ( 954 ) 928-0680

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

2008 AUG 12 PM 4:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: Trowbridge B Condominium Association, Inc.

2. The principal office address: 15364 Lakes of Delray Blvd., Unit 41  
Delray Beach, Florida 33484

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 07/23/1990 Document number: N39267

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)

BACKER LAW FIRM, PA

400 SOUTH DIXIE HWY STE 420

BOCA RATON, FL 33432

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

Kaye Bender Rembaum, P.L.

1200 Park Central Blvd. South

P.O. Box NOT acceptable

Pompano Beach, Florida 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.

Lillian College  
Signature of an officer or director

Lillian College 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]  
Signature of Registered Agent

August 6, 2019

Date

If signing on behalf of an entity:

Andrew B. Black

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)

AUG 12 PM 4:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA