

NB9277

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

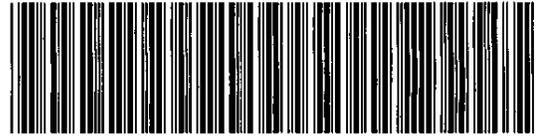
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400117621724

03/13/08--01024--014 **35.00

FILED
08 MAR 13 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA chg
DC
3/11/08



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 24, 2008

SANDY BENNETT
CEA INC.
777 SOUTH FLAGLER DR., #800 WEST TOWER
WEST PALM BEACH, FL 33401

SUBJECT: IBIS LAKES HOMEOWNERS ASSOCIATION, INC.
Ref. Number: N39277

We have received your document for IBIS LAKES HOMEOWNERS ASSOCIATION, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

The document must contain the name and capacity of the person signing on behalf of the new registered agent.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 008A00005135

RECEIVED
2008 MAR 10 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IBIS LAKES HOMEOWNERS ASSOCIATION, INC.
(Name of Corporation)

DOCUMENT NUMBER: N39277

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:

SANDY BENNETT
(Name of Contact Person)

CEA INC
(Firm/Company)

777 SOUTH FLAGLER DRIVE, SUITE 800-WEST TOWER
(Address)

WEST PALM BEACH, FLORIDA 33401
(City/State and Zip Code)

For further information concerning this matter, please call:

SANDY BENNETT at (561) 795-2232
(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

2008 JAN 29 AM 8:00
SECRETARY OF STATE
TALLHASSEE, 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: IBIS LAKES HOMEOWNERS ASSOCIATION, INC.

2. The principal office address: 1928 LAKE WORTH ROAD, LAKE WORTH, FLORIDA, 33461

3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 7/27/1990 Document number: N39277

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ASSOCIATED PROPERTY MANAGEMENT
1928 LAKE WORTH ROAD
LAKE WORTH, FLORIDA 33461

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

C.E.A., INC.
777 SOUTH FLAGLER DRIVE, SUITE 800-WEST TOWER
(P.O. Box NOT acceptable)
WEST PALM BEACH, FL 33401

FILED
08 MAR 13 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Robert B Colpitts Pres. HOA Robert B Colpitts Pres. HOA
(Signature of an officer or director) (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] Pres. 1/18/08
(Signature of Registered Agent) (Date)

If signing on behalf of an entity: ? C.E.A. INC. PROPERTY MANAGEMENT
Sandra Bennett Pres.
(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)