

N48671

(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



900271034819

03/30/15--01025--008 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
15 MAR 30 AM 8:54

C.L.
4-6-15

Siegfried • Rivera • Hyman • Lerner
De La Torre • Mars • Sobel



S R H L - L A W . C O M

LAURA M. MANNING-HUDSON
LMANNING@SRHL-LAW.COM

REPLY TO WEST PALM BEACH OFFICE

March 27, 2015

Sent Via U.S. Mail

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Boynton Waters Homeowners' Association, Inc. ("Association")

Dear Sir/Madam:

Enclosed please find the "Statement of Change of Registered Office or Registered Agent or Both for Corporations" for the above-referenced Association, along with the our firm's operating check number 1022286 in the amount of \$35.00 for the filing of same.

If you have any questions or require further documentation, please contact the undersigned.

Very truly yours,

SIEGFRIED, RIVERA, HYMAN, LERNER,
DE LA TORRE, MARS & SOBEL, P.A.



Laura M. Manning-Hudson, Esq.

LMH/kmr
Enclosures

H:\LIBRARY\CASES\7476\2140572\32R9471.DOC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Boynton Waters Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N48671

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:

James Lockyer, President
Name of Contact Person

Firm/Company

P.O. Box 740065

Address

Boynton Beach, FL 33474

City/State and Zip Code

jpl33437@gmail.com

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

For further information concerning this matter, please call:

Laura Manning-Hudson at 561 296-5444
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

**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: Boynton Waters Homeowners' Association, Inc.
2. The principal office address: 6400 W. Boynton Beach Blvd., #70065, Boynton Beach, FL 33437
3. The mailing address (if different): P.O. Box 740065, Boynton Beach, FL 33474
4. Date of incorporation/qualification: 5/1/1992 Document number: N48671
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)

HANSEN, MICHAEL J

6400 W. Boynton Beach Blvd., Suite 740065

Boynton Beach, FL 33437

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

SKRLD, Inc.

201 Alhambra Circle, 11th Floor

P.O. Box NOT acceptable

Coral Gables, FL 33134


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.


Signature of an officer or director

James Lockyer, 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 of Registered Agent

3/27/15
Date

If signing on behalf of an entity:

Helio De La Torre

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 MAR 30 AM 8:54