## 

(Requestor's Name)  (Address)	500174863125
(City/State/Zip/Phone #)	04/08/1801016014 **35.88
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:  Office Use Only	2010 APR -8 AM 10: 52 MARASSE STATES

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: GRANVILLE Contominium I Association, INC Name of Corporation	
DOCUMENT NUMBER: N93 6000 00 185	
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:	
Michael E. CHAPNICK, ESQ Name of Contact Person	
CHAPNICK COMMUNITY ASSOCIATION LAW Firm/Company	
100 EAST LINTON BLUD, STE 502.B. Address	
DELRAY BEACH, 7L 33483 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
Michael Chapvicic at (561) 330-3096  Name of Contact Person Area Code & Daytime Telephone Number	
Name of Confact 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 <u>FLORIDN</u> .  in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: GRANVIIIE CONDOMINIUM I ASSOCIATION INC
2. The principal office address: Clo CASTLE GROUP
12270 SW 3ND STREET PLANTATION, FL 33325
3. The mailing address (if different): C/o CASTLE GROUP.
P.O. Box 55 9009 FORT LAUDER DALE, 76 33355
4. Date of incorporation/qualification: 1-14-1993 Document number: N9 300000 185
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)
KATZMAN, GARFINKEL, P.A.
1501 N.W. 494 ST., SUITE 202
FORT LAUDERDALE, 76 33309
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
CHAPNICK Community ASSOCIATION LAW
100 East LINTON BLUD. SUITE 50213
DELRAY BEACH 7L 33483
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.
Stephen Kayer STEPHEN KARPE PRES.
Signature of an officer of director  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.
corporation has been notified in writing of this change.
Signature of Rogistered/Agent Date
If signing on behalf of an entity:
Michael Chaprick, President
Typed or Printed Mame

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