N9300005409

(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Misty Harbor at Silver/akes Maintenance Association, (Name of Corporation) + Trc.
DOCUMENT NUMBER: 4930000 5409
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:
Name of Contact Person)
Stevens & Goldingn, P.A. (Firm/Company)
2 South University Prive #210 (Address)
Plantation, FL 33324 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 458-9393 (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: Misty Harbor at Silverlake Maintenance Association, 7 2. The principal office address: 19620 Pines Blvd Suite 205
lembroke lines, FL 33029
3. The mailing address (if different): Yo Pines Property Management
P.O. Box 820100 Pembroke lines, F1 33082
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Robert Kaye : Associates
6261 NW 6th Way, Suik 103
.Ft. Lauderdale FL 33309
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Stevens + Goldwyn P.A.
2 South University Prive #210 (P.O. BOX NOT acceptable)
Montation FL 33324
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.
(Signification of Deep Room (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) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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