

N94000006185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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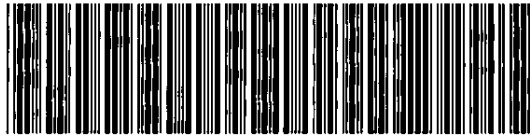
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAY 26 PM 2:25

T. Roberts MAY 29 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lake Charles Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N94000006185

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:

Larry Z. Glickman, Esquire
Name of Contact Person

Sachs Sax Caplan
Firm/Company

1850 Fountainview Blvd., Suite 207
Address

Port St. Lucie, FL 34986
City/State and Zip Code

lglickman@ssclawfirm.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Larry Z. Glickman, Esquire at (772) 871-8020
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: Lake Charles Association, Inc.

2. The principal office address: 550 S.W. Lake Charles Circle, Port St. Lucie, FL 34986

3. The mailing address (if different): same

4. Date of incorporation/qualification: 12/19/1994 Document number: N94000006185

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)

Mary R. Harvey, Esquire
~~Sachs~~ ~~Sax~~ ~~Caplan~~
1850 Fountainview Blvd., Suite 207

St Lucie West, FL 34986

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SECRETARY OF CORPORATIONS
09 MAY 26 PM 2:25

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

Larry Z. Glickman, Esquire

1850 Fountainview Blvd., Suite 207

P.O. Box NOT acceptable

Port St. Lucie, FL 34986

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.

Joan Hassler, President JOAN HASSLER, President
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]
Signature of Registered Agent

5/19/09
Date

If signing on behalf of an entity:

Larry Glickman
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)