

179500000 1946

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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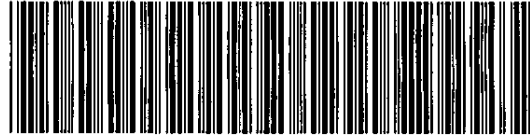
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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T. LEMMON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Palms of Tierra Homeowners Association, Inc.

Name of Corporation

DOCUMENT NUMBER: N95000001946

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:

Anne Hathorn, Esq.

Name of Contact Person

Becker & Poliakoff, P.A.

Firm/Company

1511 N. Westshore Boulevard, Suite 1000

Address

Tampa, Florida 33607

City/State and Zip Code

wcoffman@resourcepropertymgmt.com

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

For further information concerning this matter, please call:

Anne Hathorn, Esq.

Name of Contact Person

at (813) 527-3900

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: Palms of Tierra Homeowners Association, Inc.
2. The principal office address: 5901 Sun Boulevard, Suite 103
St. Petersburg, Florida 33715
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/24/1995 Document number: N95000001946

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)

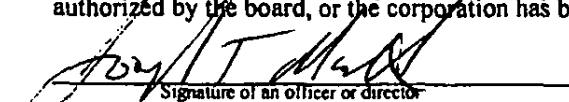
Michael J. Brudny
200 Pine Avenue North, Suite A
Oldsmar, Florida 34677

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

Becker & Poliakoff, P.A.
1511 N. Westshore Boulevard, Suite 1000
P.O. Box NOT acceptable
Tampa, Florida 33607

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

Joseph T. Marotta
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, hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

3-3-15
Date

If signing on behalf of an entity:

Anne M. Hathorn for Becker + Poliakoff, PA
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)

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MAY 18 AM 7:19
DEPT. OF STATE
TALLAHASSEE, FLORIDA