

N 96000000514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

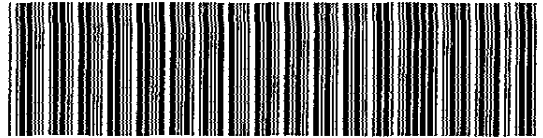
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

CA to change

Roberts APR 03 2006

201 ALHAMBRA CIRCLE | SUITE 1102 | CORAL GABLES, FLORIDA 33134 | MIAMI-DADE 305.442.3334
BROWARD 954.781.1134 | FAX 305.443.3292 | TOLL FREE 800.737.1390

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REPLY TO CORAL GABLES OFFICE

March 24, 2006

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LAUREN M. VIDAS

VIA FEDERAL EXPRESS
Division of Corporations
Amendment Section
409 E. Gaines Street
Tallahassee, FL 32399

**RE: PEACOCK'S POINT HOMEOWNER'S ASSOCIATION, INC.
("Association")**

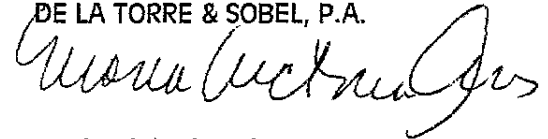
To Whom it May Concern:

The undersigned law firm represents Peacock's Point Homeowner's Association, Inc. ("Association"). Enclosed herewith are the original and a copy of the Statement of Change of Registered Office or Registered Agent or Both for Corporations ("Statement") and a check in the sum of Thirty-Five and No/100 Dollars (\$35.00). Please date stamp the copy and return to the undersigned in the enclosed self-addressed stamp envelope.

Should you require anything further, please do not hesitate to contact my office.

Very truly yours,

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



Maria Victoria Arias

MVA/bly
Enclosures

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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: PEACOCK'S POINT HOMEOWNER'S ASSOCIATION, INC.
2. The principal office address: c/o COURTESY PROPERTY MANAGEMENT, INC.
13250 S.W. 135 AVENUE, MIAMI, FL 33186
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/26/1996 Document number: N96000000514

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ROSEN, SLATON & CLARK
169 E. FLAGLER STREET, SUITE 1224
MIAMI, FL 33131

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

SKRLD, INC.
201 ALHAMBRA CIRCLE, SUITE 1102
(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] (Signature of an officer or director) Samuel Bobe, 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.

SKRLD, INC.
by: [Signature] secretary (Signature of Registered Agent) 3/17/96 (Date)

If signing on behalf of an entity:

Lisa A. Verner
(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