

N19700000000453

Scott C Gherman, PA
(Requestor's Name)

151 NW 1st Ave, Delray
(Address)

Boca Raton, FL 33444
(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

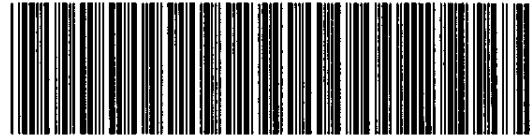
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200249485622

07/08/13--01010--009 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
13 JUL -8 AM 10:24

RA/RO/CH8
(1a) 7/12/13

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: Andros Isle Property Owners Association, Inc.
2. The principal office address: 2400 Victoria Point
West Palm Beach, FL 33411
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1-28-1997 Document number: N97000000453

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)

Shir Law Group, P.A.

1800 NW Corporate Blvd. Suite 200

Boca Raton, FL 33431

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

Scott C. Gherman, P.A.

151 NW1st Avenue

P.O. Box NOT acceptable

Delray Beach, FL 33444

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.

Paula Peitz
Signature of an officer or director

Paula Peitz
(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.

Scott C. Gherman
Signature of Registered Agent

6/26/13
Date

If signing on behalf of an entity:

Scott C. Gherman,
Typed or Printed Name

AS President

*** 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)

FILED
SECRETARY OF STATE
13 JUL -8 PM 2:24