197000001994

(Requestor's Name)			
(Address)			
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(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

ania,

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Fox Property Owners Association, Inc.			
(Name of Corporation)			
DOCUMENT NUMBER: N97000001994			
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:			
Martin P. Heise (Name of Contact Person)			
(Name of Contact Ferson)			
Fox Property Owners Association, Inc.			
(Firm/Company)			
2200 NW 2 Avenue, Suite 220 (Address)			
Boca Raton, FL 33431			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Bettina Smoot at (561) 997-0045 x-203 (Area Code & Daytime Telephone Number)			
(Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			
Amendment Section Amendment Section Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301			
Ch			
President - Martin P. Heise, 2200 NWZ Ave, #220, Boca Raton, Fr. Vice President - Erick Pamblanco, 7284 W. Palmetto Pack Rd, #2105 Roca Poeton F. 33/33			
Vice President- Erick Pamblanco, 7284 W. Palmetto Park Rd, #2105			
Secretary - Erick Pamblanco Boca Raton, E 33433			
CRZE045 (8/05) Treasurer - Erick Pamblanco			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chang	ovisions of sections 607.0502, 617.0502, c ge is submitted for a corporation organize to change its registered office or registered			
1. The name of the	e corporation: Fox Property Owners As	ssociation, Inc.		
	ffice address: 2200 NW 2 Avenue, Suit			
3. The mailing add	dress (if different):			
4. Date of incorpo	ration/qualification: 4-7-1997	Document number: N97000001994		
5. The name and s Florida Departn	street address of the current registered agen	nt and registered office on file with the		
<u>\</u>	WAM Management, Inc.	9.5 SE		
1601 Belverdere Road, Suite 407 south				
\	West Palm Beach, FL 33407	12 ARY SSE		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Martin P. Heise			
2200 NW 2 Avenue, Suite 220				
,	(P.O. Box NOT acceptable)			
<u>(</u>	Boca Raton, FL 33431			
The street address as changed will b	s of its registered office and the street ad e identical.	ddress of the business office of its registered agent,		
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	e of an officer or director)	Martin P. Heise (Printed or typed name and title)		
	he appointment as registered agent and a comply with the provisions of all statute I am familiar with and accept the oblig g filed merely to reflect a change in the been notified in writing of this change.	agree to act in this capacity. es relative to the proper and complete performance ation of my position as registered agent. Or, if this registered office address, I hereby confirm that the		
(1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Merse	August 30, 2007		
,	nature of Registered Agent)	(Date)		
If signing on beh	alf of an entity:			
Martin P. Hei	Se vped or Printed Name)			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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