N97000006787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

R.Arc
TS 12/14/04

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bahia Miramar Homeowners Association, Inc.
(Name of corporation)

DOCUMENT NUMBER: N97000006787

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:

Michael S. Chadrow
(Name of contact person)

Brough, Chadrow & Levine, P.A.
(Firm/Company)

2700 S. Commerce Parkway, Ste 305-B
(Address)

Weston, FL 33331
(City/state and zip code)

For further information concerning this matter, please call:

Michael S. Chadrow at (954) 384-0732
(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
409 E. Gaines Street
Tallahassee, FL 32399

CR2E045(6/04)

STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE AND/OR REGISTERED AGENT:

1. BAHIA MIRAMAR HOMEOWNER ASSOCIATION INC.
(Name of alien business organization)

2. _____ 3. N97000006787 4. 650880701
(Florida registration date) (Florida document number) (FEI Number, if applicable)

5. 12323 SW 55 STREET SUITE 1002 COOPER CITY FLA 33330
(Principal office address)

6. Name and address of registered agent and office currently on record with this office:

BAKALAR, BROWN & CHARTON, P.A.
150 S. Pine Island Rd. Suite 540
Plantation, FL 33324

7. New registered agent and/or office address:

BROWN, CHARTON & LEVINE, P.A.
2700 S. COMMERCE PARKWAY SUITE 305-B
WESTON, FL 33331
(Note: Registered office must be a Florida street address)

8. The street address of the registered office and the street address of the business office of the registered agent are identical.
9. Such change was authorized by the board of directors or an officer of the corporation so authorized by the board of directors.

10. _____
(Signature of chairman, vice chairman, or officer)

11. JOSEPH SCHAFFAN. PROPERTY MGR.
(Name and capacity of person signing in number 10 above)

12. Signature of new registered agent, if applicable:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

_____ 12/6/04
(Registered agent accepting appointment) (Date)

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TALLAHASSEE, FLORIDA

FILING FEE: $35.00
Make checks payable to Florida Department of State and mail to:
Division of Corporations P. O. Box 6327 - Tallahassee, FL 32314

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