N98000001657

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FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

February 12, 2003

VENETIAN ISLES AT LÄKÉ CORAL SPRINGS COMMUNITY 7071 WEST COMMERCIAL BLVD. SUITE 2B TAMARAC, FL 33319

SUBJECT: VENETIAN ISLES AT LAKE CORAL SPRINGS COMMUNITY ASSOCIATION, INC.

Ref. Number: N98000001657

We have received your document for VENETIAN ISLES AT LAKE CORAL SPRINGS COMMUNITY ASSOCIATION, INC. and check(s) totaling \$35.00. However, your check(s) and document are being returned for the following:

The registered agent must sign accepting the designation.

Please type or print the name and title of the officer signing the document underneath their signature.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 403A00009503

Attn: Hr. Lee Burg

Mease sign where indicated and return on to Surrow in the envelope provided. I'll mail to Department of State. Thank you

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

Pursuant to the	provisions of sections 60%	7.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,	
the undersigned	corporation organized und	ler the laws of the State of Florida	
submits the follo	owing statement in order to	change its registered office or registered agent, or both, in	
the State of Flor			
1. The name of the corporation: Venetian Isles at Lake Coral Springs			
Community Association. Inc.			
2. The mailing a	ddress of the corporation:	7071 West Commercial Blvd., Suite 2B	
		Tamarac, FL 33319	
3. Date of incor	poration/qualification:	3/23/98 Document number: N98000001657	
4. The name and	address of the current regi	stered agent and office:	
<u>.</u>	Sunrae Management	Services, Inc.	
_	7071 West Commerc	cial Blvd., Suite 2B	
	Tamarac, FL 33319	是 第 四	
5. The name and		red agent (if changed) and/or registered office (if changed). Box Not Acceptable)	
	Becker & Poliako	Ef, P.A.	
	3111 Stirling Roa	ad 20	
	Fort Lauderdale,	FL 33312	
The street addre	ess of its registered office and, will be identical.	and the street address of the business office of its registered	
Such change was authorized by th	as authorized by resolution to board.	duly adopted by its board of directors or by an officer so	
1/4/	Musa	2/4/03	
(Signature o	of an officer, chairman or vice chair	rman of the board) (Date)	
Traci	Mandart (Printed or typed name and ti	tle)	
Having been na corporation, I h I further agree to performance of registered agen	med as registered agent a vereby accept the appointm to comply with the provision my duties, and I am famili	nd to accept service of process for the above stated nent as registered agent and agree to act in this capacity. Ons of all statutes relative to the proper and complete iar with and accept the obligation of my position as	
BECKER	& POLIABOFF P.A.	2 10 12	
	ignature of Registered Agent)	3-10-03 (Date)	
[/	· · · · · · · · · · · · · · · · · · ·	_ -,	
If signing on behal Lee H.	Burg, Esquire	, Attorney	
	Typed or Printed Name)	(Capacity)	

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