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JUN 28 2010

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	Corsica Park Homeon Name of Corsical Park Homeon Corsical Park Homeon Name of Corsical Park Homeon Name	wners Assn., Inc.		
DOCUMENT NUI	MBER: N99	000004310		
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:				
Guy M. Shir, Esq. Name of Contact Person				
	Name of Co	ntact Person		
		0.1.51		
Kahan Shir PL Firm/Company				
·				
	1800 NW Corporate Boulevard, Suite 200			
•		ress		
	Boca Raton, FL 33431 City/State and Zip Code			
City/State and Zip Code				
_	GShir@kaha			
E-mail address: (to be used for future annual report notification)				
For further informat	tion concerning this matter, please of	call:		
	Guy M. Shir	at (561)999-	-5999	
Nam	ne of Contact Person	Area Code & Daytime Telepi	hone Number	
Enclosed-is-a-\$35:00	Ocheck made payable to the Depart	tment_of-State.		
	•			
	Mailing Address:	Street Address:		
	Amendment Section	Amendment Section	20	
	Division of Corporations P.O. Box 6327	Division of Corporation Clifton Building	15	
	Tallahassee, FL 32314	2661 Executive Center	Circle	

Tallahassee, FL 32301

1800 N. W. Corporate Blvd. Suite 200 Boca Raton, Florida 33431



Local: (561) 999-5999 Brwd.: (954) 570-9000 FAX: 561-893-0999

KAHAN \diamond SHIR, P.L. ATTORNEYS AT LAW

June 8, 2010

GUY M. SHIR, ESQ. GSHIR@KAHANSHIR.COM

Chuck McChesney, Property Manager Venetian Isles Homeowners Association, Inc. 8850 Venetian Isles Boulevard Boynton Beach, FL 33472

Re: Change of Registered Agent

Dear Mr. McChesney:

Enclosed, please find completed forms to change the Registered Agent for the four Associations, Corsica, Murano, Siena Lakes and Sorrento. Please have the Boards execute where indicated and mail in the enclosed envelope with a check for \$35.00 made payable to the Department of State.

Should you have any questions regarding this or any other matter, please do not hesitate to contact me.

Very truly yours,

Sue Jordahl

Sue Jordahl Assistant to Guy M. Shir, Esq.

Encl.

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sange is submitted for a corporation organized under the laws of the State of \underline{F} er to change its registered office or registered agent, or both, in the State of Fl	lorida
1. The name of t	the corporation: Corsica Park Homeowners Assiocation	, Inc.
2. The principal	l office address: 3900 Woodlake Boulevard, Suite 309, Lake Wort	h, FL 33463
3. The mailing a	address (if different):	•
4. Date of incorp	poration/qualification: 7/12/1999 Document number: N	99000004310
	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	h the
	Jay Steven Levine PA	-
	3300 PGA Blvd Suite 530	• ,
	Palm Beach Gardens, FL 33410	ZOIO JUNE I
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offi	25 88 88
	Guy M. Shir, Esq.	FOF ST
	1800 NW Corporate Boulevard, Suite 200 P.O. Box NOT acceptable	P 34 ORIDA
	Boca Raton, FL 33431	
The street addre	ess of its registered office and the street address of the business office of its l be identical.	s registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an he board, or the corporation has been notified in writing of the change.	officer so
John Signatur	re of an officer or director ROBLET S. CHES	KES, PRESIDENT
I hereby accept I further agree to of my duties, an document is bei corporation has	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and com and I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereby is been notified in writing of this change.	plete performance I agent. Or, if this y confirm that the
své	June 8, 2010 Date Date	
>	chalf of an entity:	
	Guy M. Shir, Esq. Typed or Printed Name	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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