

Jul. 30. 2008 2:37PM

CHERRY EDGAR & SMITH P.A.

No. 1807/2-8 9/31

N99000005299

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000184440 3)))



H080001844403ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CHERRY & EDGAR, P.A.
Account Number : 072100000272
Phone : (561) 471-7767
Fax Number : (561) 471-7974

FILED
08 JUL 30 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

ABACOA TOWN CENTER PHASE TWO PROPERTY OWNERS' ASSOCI

RECEIVED

2008 JUL 30 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

Help

10/13/08
207

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ABACOA TOWN CENTER PHASE TWO PROPERTY OWNERS' ASSOCIATION, INC.
(Name of Corporation)

DOCUMENT NUMBER: N99000005299

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:

CHARLES W. EDGAR, III
(Name of Contact Person)

CHERRY, EDGAR & SMITH, P.A.
(Firm/Company)

8409 N. MILITARY TRAIL, SUITE 123
(Address)

PALM BEACH GARDENS, FL 33410
(City/State and Zip Code)

For further information concerning this matter, please call:

CHARLES W. EDGAR, III at (561) 471-7767
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: ABACOA TOWN CENTER PHASE TWO PROPERTY OWNERS' ASSOCIATION, INC.
2. The principal office address: 661 UNIVERSITY BLVD, SUITE 200, JUPITER, FL 33458
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/03/1990 Document number: N99000005289
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

REGSERV CORP.

661 UNIVERSITY BLVD, SUITE 200

JUPITER, FL 33458

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

CHARLES W. EDGAR, III

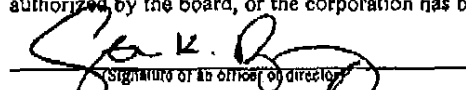
8409 N. MILITARY TRAIL, SUITE 123

(P.O. Box NOT acceptable)

PALM BEACH GARDENS, FL 33410

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.


(Signature of an officer or director)

Stephen K. Barry, President
(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.*


(Signature of Registered Agent)

July 30, 2008
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** 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 (8/05)

FILED
08 JUL 30 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA