## P07000002796

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R.A. Change

TB 2-18-08

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: Harbor Delray, Inc (Name of Con	rporation)			
DOCUMENT NUMBER:				
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter t	to the following:			
Sandra Shea Siegel (Name of Cont	act Person)			
Harbor Delray, Inc (Firm/Company)				
(Firm/Con	npany)			
685 East Hillsboro Blvd				
(Addre	ess)			
Deerfield Beach, Florida 33441 (City/State and	(Zin Code)			
•				
For further information concerning this matter, please ca	iii:			
Sandra Shea Siegel	at (561 ) 901-3388 (Area Code & Daytime Telephone Number)			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Departm	nent 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

statement of cha	provisions of sections 607.0502, 617.0502, nge is submitted for a corporation organiz r to change its registered office or register	· -	
1. The name of t	he corporation: Harbor Delray, Inc		
2. The principal	office address: 685 East Hillsboro Blvd, D	eerfield Beach, Fl 33441	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 01/05/07	Document number: P07000002796	
	street address of the current registered agreement of State:	ent and registered office on file with the	
	Corporation Services Company		
	1207 Hays Street		
	Tallahassee, Fl 32301		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Sandra Shea Siegel			
	Sandra Shea Siegel	ASS.	
	685 East Hillsboro Blvd, Deerfield Beach, Fl 33441  (P.O. Box NOT acceptable)		
	(1/3. Box NoT deceptable)	ORID ORID	
The street addre	ess of its registered office and the street a be identical.	ddress of the business office of its registered agent,	
Such change wa authorized by th	is authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an officer so ified in writing of the change.	
Signatu	re of an officer or direction	Sandra Shea Siegel (Printed or typed name and title)	
I hereby accept I further agree t of my duties, an document is beil corporation has	the appointment as registered agent and to comply with the provisions of all statu d I am familiar with and accept the obli ng filed merely to reflect a change in the been notified in writing of this change.	l agree to act in this capacity. tes relative to the proper and complete performance gation of my position as registered agent. Or, if this registered office address, I hereby confirm that the	
Saria	u Dua Sisol	03/10/08	
	thature of Registered Agent)  half of an entity:	(Date)	
Sandra Shea	•		
	yped 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 \* \* \*