## 096000019163

(Requestor's Name)					
(Address)					
(Address)					
•					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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(Document Number)					
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C. Coulliste MAR 1 9 2007

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT:	BLUE HAVEN POOLS	OF WEST PALM BEACH, IN	C.
	()	lame of Corporation)	
DOCUMENT NUI	MBER:	P96000019163	
The enclosed Stater	ment of Change of Registe	ered Office/Agent and fee are subm	itted for filing.
Please return all cor	respondence concerning t	this matter to the following:	
		Sophy Keo	
•	(Na	me of Contact Person)	
	Charles E	Baclet and Associates, Inc.	
_		(Firm/Company)	
	2030 I	Main Street, Suite 1030	
<u> </u>		(Address)	
		Irvine, CA 92614	
_	(Cit	ty/State and Zip Code)	
For further information	tion concerning this matte	r, please call:	
	Sophy Keo	at ( <u>800</u> ) (Area Code & Day	562-6439
(Nai	me of Contact Person)	(Area Code & Day	time Telephone N

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 60 statement of change is submitted for a community in order to change its registered	rporation organiz	ed under the laws of the State	e of <u>Florida</u>		
The name of the corporation:	BLUE HAVE	N POOLS OF WEST PA	LM BEACH, INC.		
2. The principal office address: 2273 N	Penn Road, Ha	tfield, PA 19440			
3. The mailing address (if different): 20	30 Main Street,	Suite 1030, Irvine, CA 92	2614		
4. Date of incorporation/qualification:	3/1/1996	Document number:	P96000019163		
5. The name and street address of the cur Florida Department of State:	rent registered ago	ent and registered office on fi	le with the		
Corp	orate Creations	Network, Inc.			
11360 Prosperity Farms Rd, #221E					
Paln	Palm Springs Gardens, FL 33410				
6. The name and street address of the new (if changed):	v registered agent	(if changed) and /or registere			
	NRAI Servic	es, Inc.	6 PM RY OF SSEE. F		
2731 Executive Park Drive, Suite 4					
(P.O.	(P.O. Box NOT acceptable)  Weston, FL 33331				
The street address of its registered offic as changed will be identical.	e and the street a	ddress of the business office	of its registered agent,		
Such change was authorized by resolut authorized by the board, of the corporate					
Signaturo Jan Olifice Silvers		Larry Katz, P			
I hereby accept the appointment as reg. I further agree to comply with the provi of my duties, and I am familiar with and document is being filed merely to reflect corporation has been notified in writing (Signature of Registered Agint)  If signing on behalf of an entity:	isions of all statu d accept the oblig t a change in the g of this change.	agree to act in this capacity	y. d complete performance		
Paul J. Hagan, Assistant Secret	ary				

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