(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
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R.A.

MBrawn 9-30-11

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Club Longboat Beach and Ten Name of Con	nnis Condominium Assor
DOCUMENT NUMBER: 72	23799
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:
Christine , Adminis Name of Cont	strative Assistant tact Person
Club Longboat Beach and Firm/Con	
5055 Gulf of M	
Addre	
Longboat Key City/State and	7, FL 34228 1 Zip Code
clublongboat@c	
For further information concerning this matter, please ca	ult:
Christine	at (941) 383-6081 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

1. The name of t	the corporation: Club Longboat Beach and Tennis Condominium Association	. .
	office address: 5055 Gulf of Mexico Drive, Longboat Key, FL. 34228	71
		-
3. The mailing a	uddress (if different): Same	•
4. Date of incorp	poration/qualification: 6/30/72 Document number: 723799	- -
	I street address of the current registered agent and registered office on file with the trment of State: (If resigned, enter resigned)	
	Beth Callans Management Corp.	
	595 Bay Isles Road Suite 200	
	Longboat Key, FL. 34228	
6. The name and (if changed):	Longboat Key, FL. 34228 I street address of the new registered agent (if changed) and /or registered office SSE Steve Bierman, Onsite Manager	
	Steve Bierman, Onsite Manager	
	5055 Gulf of Mexico Drive	
	P.O. Box NOT acceptable Longboat Key, FL 34228	
The street addre	ess of its registered office and the street address of the business office of its registered agent.	
Such change wa	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.	
15	Jack Daly, President Printed or typed name and title	
I hereby accept I further agree t of my duties, and document is bein corporation has	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 complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the speen potified in writing of this change.	
Sign	halptre of Registered Agent	
If signing on bel	half of an entity:	
	yped or Printed Name	

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