

751957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

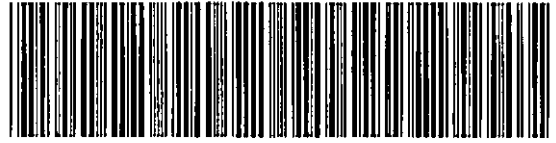
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STATE OF TEXAS  
COMPTROLLER OF PUBLIC ACCOUNTS

2022 DEC 19 PM 12:45

FILED

Kevin L. Edwards  
Shareholder  
Board Certified Specialist, Condominium and  
Planned Development Law  
Phone: 941.953.7403 Fax: 941.907.0080  
kedwards@beckerlawyers.com

# Becker

Becker & Poliakoff  
1819 Main Street  
Suite 905  
Sarasota, FL 34236

2022 DEC 19 PM 3:43

December 13, 2022

**Via U.S. Mail**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: **Change of Registered Agent for Heronmere II Condominium Association, Inc.**  
**Document Number: 751957**  
**Letter Number: 622A00027208**  
Client/Matter No. H03530-221475

Dear Sir/Madam:

Pursuant to your correspondence dated December 8, 2022, enclosed please find the executed Statement of Change of Registered Office or Registered Agent form for the above-referenced Association.

Should you have any questions, please feel free to contact me.

Sincerely,



**KEVIN L. EDWARDS**  
For the Firm

KLE/lv  
Enclosures



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 8, 2022

BECKER & POLIAKOFF  
1819 MAIN STREET  
SUITE 905  
SARASOTA, FL 34236

SUBJECT: HERONMERE II CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: 751957

We have received your document for HERONMERE II CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

No Statement of Change of Registered Office/Agent was attached. I am enclosing the Form.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 622A00027208

**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: HERONMERE II CONDOMINIUM ASSOCIATION, INC.
- 2. The principal office address: 2477 Stickney Pt. Rd., Suite 118A, Sarasota, FL 34235
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 04/10/1980 Document number: 751957
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Becker & Poliakoff  
6230 University Parkway, Ste. 204  
Sarasota, FL 34240

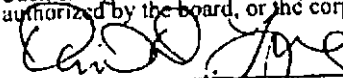
- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Becker & Poliakoff, P.A.  
1819 Main Street, Suite 905  
 \_\_\_\_\_  
P.O. Box NOT acceptable  
Sarasota, FL 34236

FILED  
 2022 DEC 19 PM 12:45  
 TALLAHASSEE, FL

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

David D. Leque - 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

8/18/22  
Date

If signing on behalf of an entity:

Kevin L. Edwards, Esq.  
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 (04/13)