765525

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	_ MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On	lv ⁱ



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COVER LETTER

TO: Amendment Section Division of Corporations

Colony Key Homeowners Association, Inc.

Name of Corporation

765525

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:

Anne M. Hathorn, Esq.

Name of Contact Person

Becker & Poliakoff, P.A. Firm/Company

1511 N. Westshore Boulevard, Suite 1000

Tampa, Florida 33607

ccuccarese@associagulfcoast.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
	he corporation: Colony Key Homeowners Association, Inc.
2. The principal	office address: 5000 Bayshore Boulevard Tampa, FL 33611
2 (7)	ddress (if different): 9887 Fourth Street North, No. 301
3. The mailing a	St. Petersburg, FL 33702
4. Date of incorp	poration/qualification: 10/25/1982 Document number: 765525
	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Associa Gulf Coast, Inc.
	9887 Fourth Street North, No. 301
	St. Petersburg, FL 33702
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Becker & Poliakoff, P.A. 1511 N. Westshore Boulevard, Suite 1000 Becker & Poliakoff, P.A. 3
	1511 N. Westshore Boulevard, Suite 1000
	Tampa, FL 33607
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa	is authorized by resolution duly adopted by its board of directors or by an officer so he board or the corporation has been notified in writing of the change.
	re of an officer of threefor Printed or lyned name and title Printed or lyned name and title
1 -	
I further agree I performance of agent. Or, if the	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 my duties, and I am familiar with and accept the obligation of my position as registered is document is being fited merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Sign	nature of Registered Agent Date
If signing on be	half of an entity:
Becker f	Polia Koff, P.A.

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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