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JAN 19 2012

**EXAMINER** 

## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: VAN LOON BO	SINESS PARK CARDOMINIUM DWNERS ASSOCIATION, FIC.
	BER: <i>NOS 00000</i>	
The enclosed Articles	of Amendment and fee are su	abmitted for filing.
Please return all corres	pondence concerning this ma	tter to the following:
•	GENE R. BEA	CHER
		Name of Contact Person
:	SUNSHINE REI	Firm/ Company
		Firm/ Company
	234 DEL PRAS	OBLYD N. UNIT 4
•		Address
	CAPÉ CORAL	City/ State and Zip Code
•	7	City/ State and Zip Code
GE	E-mail address: (to be us	SHINEREALTISTS TO FLORING sed for future annual report notification)
		$\mathcal{C}^{\mathcal{A}}$ .
For further information	concerning this matter, pleas	se call:
GÉNÉ R. E	CACHER	at ( \( \sum 3 \( \frac{9}{2} \)) \( \frac{9}{2} \) \( \frac{600 \text{3}}{2} \) Area Code & Daytime Telephone Number
Name o	f Contact Person	Area Code & Daytime Telephone Number
		payable to the Florida Department of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status enclosed)	□\$43.75 Filing Fee & □\$52.50 Filing Fee ' Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy
		is enclosed)
	ing Address adment Section	Street Address Amendment Section

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 28, 2011

GENE R. BRACHER SUNSHINE REALTY OF SW FL, INC. 234 DEL PRADO BLVD. N., UNIT 4 CAPE CORAL, FL 33909

SUBJECT: VAN LOON BUSINESS PARK CONDOMINIUM OWNER'S

ASSOCIATION, INC.

Ref. Number: N05000008289

We have received your document for VAN LOON BUSINESS PARK CONDOMINIUM OWNER'S ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 511A00028696

Sent back on Jan 9\_ need correct alopt.

PLECEIVED
12 JAN -6 AM 9: 15
TALLA INSTRUMENTAL

www.sunbiz.org



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

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Cheryl Coulliette
Regulatory Specialist II

Letter Number: 511A00028696

PEOEI JAN 18 A

www.sunbiz.org

you must use the page 40,4 for e non-project adoption-this one

# Articles of Amendment to Articles of Incorporation of

AN LOW BUSINESS PARK CONDOMINI (Name of Corporation as currently filed with the F	TUM OWNER'S ASSOCIATION, THE	;
NoSoooo8 > 89 (Document Number of Corpo	oration (if known)	
ursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation adopts the	following
. If amending name, enter the new name of the corpora	ation:	
N/A		The new
ame must be distinguishable and contain the word "corpor Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp." o	or "Inc."
Enter new principal office address, if applicable:	234 DEL PRADO BLVD N.	
Principal office address <u>MUST BE A STREET ADDRESS</u>	UNIT 4	
	CAPE CORAL, FL 33909	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	234 DEL PRADO BLVD N.	
	UNIT 4	
	CAPÉ CORAL, FL 33909	
. If amending the registered agent and/or registered off		
new registered agent and/or the new registered office	address:	
Name of New Registered Agent:	<u> </u>	
	(Florida street address)	
New Registered Office Address:	•	
	, Florida	
(City	y) (Zip Code)	
ew Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f	ed Agent: Camiliar with and accept the obligations of the position.	12 JAN I
Signature of New Reg.	istered Agent, if changing	<b>8</b>
	Page 1 of 4	AH &

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	<u>PT</u> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	<u> Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	PD	WAYNE A. FITCH	2033 SE 21ST LANE CAPE CORAL, FL 33990
2) Change Add Remove	<u>_P</u>	GIANLUCA MELE	413 NE VAN LOON LANE UNIT 103+104 CAPE CORAL, FL 33909
Change Add Remove	<u>YD</u>	LON C. ELLIOTT 11	2304 SE 19TH PLACE CAPE CORAL, FL 33990
4) Change Add Remove	<u> </u>	JOHN SAWYER	413 NE VAN LOON LAWE UNIT 197 CAPE COZAL, FL 33909
5) Change Add Remove	SD	LARRY VAHUE	2033 SÉ YIST LANE CAPÉ CORAL, FL 33990
6) Change Add Remove	<u>S</u> _	DAW PERRY	LO 300 HASKIN RD. N. FORT MYERS, FL 33917

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

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Example: X Change	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ze Jones	
_X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove	TD	THOMAS TEUFEL	2033 SE 21 <sup>ST</sup> LAME CAPE CORAL, FL 33990
2) Change Add Remove	I	JOD! TANNER	413 NE VAN LOON LANE LN IY 102- CAPE CORAL, FL 33908
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
TO AMEND ARTICLE VI ADDING SECTION C.1
C. 1 AT THE ASSOCIATION MEETING OF THE MEMBER. CUNIT OWNERS) ON DECEMBER IS, 2011 IT WAS
UNANIMOUSLY VOTED TO PASS THE RESOLUTION
TURNING ONER CONTROL OF THE ASSOCIATION TO
THE MEMBERS FROM THE DEVELOPERS AND TO
ELECT A NEW BOARD OF DIRECTORS FROM THE
CURRENT MEMBERS (UNIT OWNERS).
F. If an amendment provides for an exchange, reclassification, of cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
N/A

The dat	te of each amendment(s) adoption: DECKUBAP 15, 2011
Effectiv	e date if applicable:
	(no more than 90 days after amendment file date)
Adoptio	on of Amendment(s) (CHECK ONE)
The was	e amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) s/were sufficient for approval.
	ere are no members or members entitled to vote on the amendment(s). The amendment(s) was/were opted by the board of directors.
	Dated 12/16/1/
	Signature Worlne A Fath
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	WAYNE A FITCH
	(Typed or printed name of person signing)
	Pres.

(Title of person signing)