## NO6190

Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS

RA ROCHS
1.25,08

## **COVER LETTER**

Division of Corporations
SUBJECT: Treasure Taland Lagoons Condominium Associationi (Name of Corporation)
DOCUMENT NUMBER: NO 6190
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:
Manyorie A. LINSLEV (Name of Contact Person)
Treasure Island Logoons Condo Assoc. (Firm/Company)
9901 1ST ST E- Unit E (Address)
Trerescene Island FL 33 706 (City/State and Zip Code)
For further information concerning this matter, please call:
Marjorie A Lingue y at (727) 360-5212 (Area Code & Daytime Telephone Number)

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

TO:

Amendment Section

## 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 ange is submitted for a corporation organized under the laws of the State of Florida.  The change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Treasure Island Lagoons Condominium Association INC.
2. The principal	office address: $9901 - 1^{27}$ ST $E - Unit E$
3. The mailing a	Trecesure Island, FL 33706 address (if different):
4. Date of incor	poration/qualification: November 15 Document number: NOG 190
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State:
•	Lamont Sue
	250 104th Ave
	Treasure Island, FL 33406
6. The name and (if changed):	Treasure Island, FL 33706  d street address of the new registered agent (if changed) and /or registered office  LINSLEY, Marjorie A  9901 151 57 E - Unit E  (PO Box NOT accentable)
	LINSLEY, Marjorie A
	(Fig. 1991 Fig. 1991)
	Treasure Tsland, FL 33706
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, l be identical.
Such change wauthorized by t	as 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.
(Signat	join a Friely Norjonie A Linsley, Secretory (Printed or typed name and title),
I further agrée of my duties, ar document is be	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 and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
U	gnature of Registered Agent)  Chalf of an entity:
Treasur Morjoria	E Island Lagrons and Asso: Typed or Printed Name) = A. Linsley *** 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 (8/05)