

N95000002892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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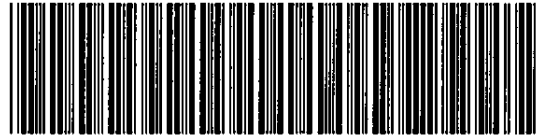
(Business Entity Name)

(Document Number)

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8-24-07

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Sandpiper Isle Condominium Association, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N95000002892

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:

Jack Erickson  
(Name of Contact Person)

J.E.M. Property Management  
(Firm/Company)

3300 Cayman Lane  
(Address)

Naples, FL 34119  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jack Erickson at ( 239 ) 595-7585  
(Name of Contact Person) (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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 8, 2007

JACK ERICKSON  
3300 CAYMAN LANE  
NAPLES, FL 34119

SUBJECT: SANDPIPER ISLE CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: N95000002892

We have received your document for SANDPIPER ISLE 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):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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) 245-6916.

Carol Mustain  
Document Specialist

Letter Number: 407A00048688

**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: Sandpiper Isle Condominium Association

2. The principal office address: 3300 Cayman Lane, Naples, FL 34119

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 06/19/1995 Document number: N9500002892

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Park Avenue Property Management

10961 Bonita Beach Rd.

Bonita Springs, FL 34135

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

~~J.E.M. Property Management~~ → MI-JACK LLC, doc.# L07000056833

3300 Cayman Lane

(P.O. Box NOT acceptable)

Naples, FL 34119

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.

Nancy McElhaney  
(Signature of an officer or director)

Nancy McElhaney, Secretary  
(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.*

Jack Erickson  
(Signature of Registered Agent)

7/27/2007  
(Date)

If signing on behalf of an entity:

Jack Erickson  
(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 (8/05)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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