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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

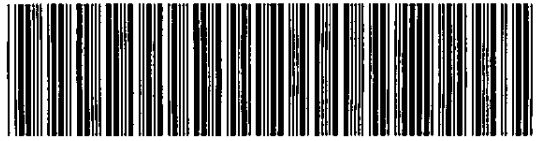
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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OCT 11 2016
R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Westminster Community Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N96000000200

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:

Christopher J. Shields

Name of Contact Person

Pavese Law Firm

Firm/Company

1833 Hendry Street

Address

Fort Myers, FL 33901

City/State and Zip Code

cjs@paveselaw.com

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

For further information concerning this matter, please call:

Christopher J. Shields

Name of Contact Person

at (**239**) **336-6245**

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

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: Westminster Community Association, Inc.
- 2. The principal office address: 2001 Oxford Ridge Circle, Lehigh Acres, FL 33973
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 1/11/1996 Document number: N96000000200

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, P.A.
12140 Carissa Commerce Court, #200
Fort Myers, FL 33966

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

Christopher J. Shields/Pavese Law Firm
1833 Hendry Street
P.O. Box NOT acceptable
Fort Myers, FL 33901

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STATE DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

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.

William Cossart
Signature of an officer or director

William Cossart
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]
Signature of Registered Agent

10-4-16
Date

If signing on behalf of an entity:
Christopher J. Shields
Typed or Printed Name

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