## N21774

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PICK-UP WAIT MAIL				
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(Document Number)				
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SECRETANY OF STATE
TALLAHASSEE, PLORIDA

## **COVER LETTER**

Amendment Section Division of Corporations TO:

SUBJECT: Fountain Lakes Community Association, Inc.  Name of Corporation				
DOCUMENT NUM	BER: N	V21774		
The enclosed Stateme	ent of Change of Registered Office	e/Agent and fee are submitted for fil	ling.	
Please return all correspondence concerning this matter to the following:				
<u>-</u>	Judith B Name of Con	onacci itact Person		
_	Platinum Propert			
1016 Collier Center Way #102 Address		nter Way #102		
_	Naples, F City/State an	<u>L 34110</u> d Zip Code		
Ē	jbonacci@plati -mail address: (to be used for fi	inumpm.net uture annual report notification)		
For further information concerning this matter, please call:				
	udith Bonacci	_at ( <u>239</u> ) * 596- Area Code & Daytime Telepl	-1031	
Name	of Contact Person	Area Code & Daytime Telepl	none Number	
Enclosed is a \$35.00	check made payable to the Departi	ment 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 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: Fountain Lakes Community Association, Inc.				
2. The principal office address: 1016 Collier Center Way #102				
Naples, FL 34110				
3. The mailing address (if different):				
4. Date of incorporation/qualification: 07/29/1987 Document number: N21774				
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)				
Jerry Cattrell				
22201 Fountain Lakes Blvd. Suite 1				
Estero, FL 33928				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
Platinum Property Management Control of the Control				
1016 Collier Center Way #102 P.O. Box NOT acceptable				
Naples, FL 34110				
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.				
Signature of an Opicer or director  Signature of an Opicer or director  Signature of an Opicer or director  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 of Registered Agent  11-11-10 Date				
If signing on behalf of an entity:				
Typed or Printed Name  * * * FILING FEE: \$35.00 * * *				