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SECRETARY OF STATE DIVISION OF CORPORATIONS

AMS/12

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Enclave at Naples		
Name of Corporation		
DOCUMENT NUMBER: N0500001038		
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:		
Kevin Wright		
Name of Contact Person		
Enclave at Naples		
Firm/Company		
1295 Wildwood Lakes Blvd		
Address		
Naples, FL 34104		
City/State and Zip Code		
enclavenaples@comcast.net		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Leesa Carr Name of Contact Person at (239) 354-3200 Area Code & Daytime Telephone Number		
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 Street Address: Amendment Section		
Division of Corporations Division of Corporations		

Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	rprovisions 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 er to change its registered office or registered agent, or both, in the State of Florida. The corporation: Enclave at Naples CONDOMINIUM ASSOCIATION.	
2. The principal office address: 1295 Wildwood Lakes Blvd. Naples, FL 34104		
3. The mailing	address (if different):	
4. Date of incom	rporation/qualification: 2/1/2005 Document number: N05000001038	
5. The name an	d street address of the current registered agent and registered office on file with the urtinent of State: (If resigned, enter resigned) Joan Colosimo	
	1295 Wildwood Lakes Blvd	
	Naples, FL 34104 72	
6. The name an (if changed):	Naples, FL 34104 d street address of the new registered agent (if changed) and /or registered office	
	Kevin Wright	
	1295 Wildwood Lakes Blvd.	
	P.O. Box NOT acceptable Naples, FL 34104	
The street addr	ess of its registered office and the street address of the business office of its registered agent, I 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.	
	We of anothicer or director KEUSO WREGHT, RESIDENT TROASURER Printed or typed name and little	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t 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 f my duties, and I am familiar with and accept the obligation of my position as registered its document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
	5-4-12	
	chalf of an entity: One of Printed Name	

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