

709001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

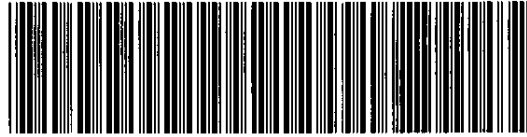
(Document Number)

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11 AUG 24 PM 4:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Handwritten signature and date: 8/24



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 27, 2011

CATHY SUPPES  
MOORE PROPERTY MANAGEMENT, LLC  
745 12TH AVE SOUTH, STE AA  
NAPLES, FL 34102

SUBJECT: THE MANOR, INC.  
Ref. Number: 709001

We have received your document for THE MANOR, 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):

An officer or director must sign document in the space below on the form.

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) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 211A00015439

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Manor Inc.  
Name of Corporation

**DOCUMENT NUMBER:** 709001

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:

Graham Norcombe  
Name of Contact Person

Moore Property Management  
Firm/Company

5603 Naples Blvd  
Address

Naples, FL 34109  
City/State and Zip Code

gnorcombe@moorepm.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Graham Norcombe at ( 239 ) 598-5980  
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

**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: The Manor
2. The principal office address: 211 3rd Avenue South  
Naples, FL 34102
3. The mailing address (if different): Moore Property Management  
5603 Naples Blvd. Naples, FL 34109
4. Date of incorporation/qualification: 05.20.1965 Document number: 709001
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)

Coastal Property Management  
501 Goodlette Road N. Ste. C200  
Naples, FL 34102

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

Moore Property Management  
5603 Naples Blvd  
Naples, FL 34109

P.O. Box NOT acceptable

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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.

James T. Whitman Jr.  
Signature of an officer or director

JAMES T. WHITEMAN JR, TREASURER  
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

August 15, 2011  
Date

If signing on behalf of an entity:

Graham Norcombe  
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)