

714779

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

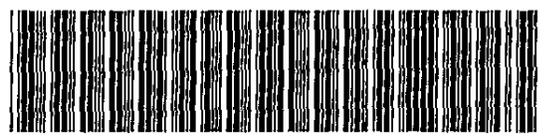
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05/21/03--01053--008 **35.00

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TALLAHASSEE, FLORIDA

PS 5/25/03

LAW OFFICES
LOBECK HANSON & WELLS

DANIEL J. LOBECK
MARK A. HANSON
KEVIN T. WELLS
DAVID C. MEYER

PROFESSIONAL ASSOCIATION

CONDOMINIUM
COOPERATIVE AND
COMMUNITY
ASSOCIATIONS

CIVIL LITIGATION
PERSONAL INJURY
FAMILY LAW
LAND USE LAW
ESTATES AND TRUSTS

2033 MAIN STREET, SUITE 403
SARASOTA, FL 34237
(941) 955-5622
FAX (941) 951-1469
E-MAIL law@lobeckhanson.com
INTERNET www.lobeckhanson.com

May 19, 2003

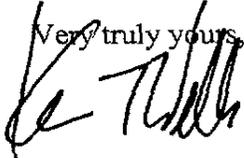
Amendment Section
Florida Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Fisherman's Cove Association, Inc.
Statement of Change of Registered Office or Registered Agent

Dear Sir or Madam:

Enclosed for filing with your office is an original Statement of Change of Registered Office or Registered Agent or Both for Corporations. Also enclosed is an Association check (Check No. 7478) in the amount of \$35 made payable to the Division of Corporations for the filing fee. Please change your corporate records accordingly.

Thank you for your courtesies and cooperation in this matter.

Very truly yours,

Kevin T. Wells, Esquire

KTW/elk
Enclosures

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Fisherman's Cove Association, Inc.

(Name of corporation)

DOCUMENT NUMBER: 714779

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 T. Wells, Esquire

(Name of person)

Lobeck Hanson & Wells, Inc.

(Name of firm/company)

2033 Main Street, Suite 403

(Address)

Sarasota, FL 34237

(City/state and zip code)

For further information concerning this matter, please call:

Kevin T. Wells, Esquire at (941) 955-5622

(Name of 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
409 E. Gaines Street
Tallahassee, FL 32399

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: Fisherman's Cove Association, Inc.
- 2. The principal office address: 9000 Blind Pass Road, Sarasota, Florida 34242
- 3. The mailing address (if different): 9000 Blind Pass Road, Sarasota, Florida 34242
- 4. Date of incorporation/qualification: 06/17/1968 Document number: 71477

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DEPARTMENT OF STATE

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

Dan Lobeck Esq.
2063 Main Street, Suite 101
Sarasota, FL 34237

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

The Law Offices of
Lobeck Hanson & Wells, P.A. c/o Kevin T. Wells, Esquire
2033 Main Street, Suite 403
(P.O. Box or personal mailbox NOT acceptable)
Sarasota, FL 34237

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.

Norman H. Bell
(Signature of an officer, chairman or vice chairman of the board)

NORMAN BELL VPO
(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)

5-5-03
(Date)

If signing on behalf of an entity:
Kevin T. Wells, Esquire
(Typed or Printed Name)

Attorney
(Capacity)

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