718512

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COVER LETTER

то:	Amendment Section Division of Corporations						
SUBJ Name	ECT: Roayl Harbor Association, Inc. of Corporation		 	 			
I valific	or emperation						
DOC	UMENT NUMBER: 718512	,					
The c	nclosed Statement of Change of Registered	d Office/Age	nt and fee	are submitted for filing.			
Please	e return all correspondence concerning this	s matter to th	e followin	g:			
Micha	el Rinaldi						
Name	of Contact Person						
Royal	Harbor Association						
Firm/	Company						
1667 1	Bonita Ct						
Addre	ess						
Naple	s, FL 34102						
City/S	State and Zip Code						
	mrinaldifl@yahoo.com						
E-ma	il address: (to be used for future annua	l report not	ification)				
For fu	irther information concerning this matter,	please call:					
	nel Rinaldi		, 239	\825-2254			
(VIICINA	Name of Contact Person	at	Area Co)825-2254 de & Daytime Telephone Number			
	rune of Contact Leison		3 -				
Enclo	sed is a \$35.00 check made payable to the	Department	of State.				
	Mailing Address:		et Address				
Amendment Section			Amendment Section				
	Division of Corporations		Division of Corporations				
P.O. Box 6327 The Centre of Tallahassee				l Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

Pursuant to the p	provisions of sections 607.0502,	617.0502, 607.1508, or 617.1508, Florida Statutes, to on organized under the laws of the State of Florida	this	
statement oj cna in orde	nge is suomitteu jor a corporatio r to change its registered office (or registered agent, or both, in the State of Florida.		
	he corporation: Royal Harbor As			
The name of t	office address: 1667 Bonita Ct., N	Naples, FL 34102		
2. The principal	office address.			
3. The mailing a	ddress (if different): P.O. Box 25	532 Naples, FL 34102		
4. Date of incorp	poration/qualification: 5/14/70	Document number: 718512		
	I street address of the current reg trment of State: (If resigned, ento	ristered agent and registered office on file with the resigned)		
	Michael A Kehoe			
	1407 Marlin Drive			
	Naples, FL 34102		1021 FEB -11	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Michael Rinaldi		=	
	1667 Bonita Ct.	·	W 8: 119	
		P.O. Box NOT acceptable	⊙"	
	Naples, FL 34102			
as changed will	be identical.	he street address of the business office of its registe		
Such change w authorized by t	as authorized by resolution dul- he board, or the corporation has	y adopted by its board of directors or by an officer so been notified in writing of the change.	30	
Am	d. 4. 5.11 ll	Donna Krall, President		
_	ire of an other or director	Printed or typed name and title		
I further agree of my duties, at document is he	to comply unth the projectors (agent and agree to act in this capacity. of all statutes relative to the proper and complete pe of the obligation of my position as registered agent, inge in the registered office address, I herehy confir s change.	erformance Or, if this om that the	
.//,	(1 / m) / / !	2/1/21		
·	gnature of Registered Agent	Date		
If signing on bo	ehalf of an entity:			
Michael Rinaldi		<u> </u>		
-	Typed or Printed Name			

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