

719339

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

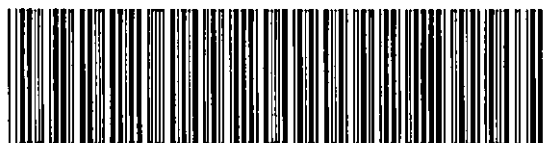
(Business Entity Name)

(Document Number)

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STATE OF CALIFORNIA
SANTA ANA COUNTY

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APR 22 2020
ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PARKWAY VILLES CONDOMINIUM ASSOCIATION, INC
Name of Corporation

DOCUMENT NUMBER: 719339

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:

BRETT SARASON
Name of Contact Person

WILSON ELSER
Firm/Company

2063 MAIN STREET, SUITE 100
Address

SARASOTA, FL 34257
City/State and Zip Code

E-mail address: BRETT.SARASON@WILSONELSER.COM
(to be used for future annual report notification)

For further information concerning this matter, please call:

BRETT SARASON at (941) 210-5890
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PARKWAY VILAS CONDOMINIUM ASSOCIATION, INC.

2. The principal office address: 6000 CORAL WAY
BRADENTON, FL 34207

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 9-17-1970 Document number: 719339

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)

LAW OFFICES OF WELLS/DLAH, P.A.
1800 SECOND STREET, SUITE 808
SARASOTA, FL 34236

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

BRETT SARASON, ESQUIRE
WILSON ELSER
2063 MAIN STREET, SUITE 100, SARASOTA, FL 34237

P.O. Box NOT acceptable

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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.

Wayne Wisbrow
Signature of an officer or director

DOYLE A. DISBROW, 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

4-6-2020
Date

If signing on behalf of an entity:

Brett Sarason
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