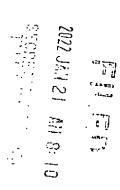


(Re	equestor's Name)	-
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT WAIT	MAIL
	usiness Entity Nan	ne)
`	•	•
(Do	ocument Number)	
•	,	
Certified Copies	Certificates	of Status
Cettined Copies		Of Claids
		
Special Instructions to	Filing Officer:	
	Q. SILAS	
	16.1.1.1.1.1.100	
	1 1000	

Office Use Only





Joseph E Adams
Office Managing Shareholder
Board Certified Attorney, Condominium and
Planned Development Law
Phone: 239.628.4914 Fax: 239.433.5933
jadams@beckerlawyers.com



Becker & Poliakoff Six Mile Corporate Park 12140 Carissa Commerce Court, Suite 200 Fort Myers, Florida 33966

Northern Trust Building 4001 Tamiami Trail North, Suite 270 Naples, Florida 34103

January 19, 2022

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: East Greens Condominium, Inc. (Document No. 722090)

To Whom It May Concern:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above-referenced Association. Also enclosed, please find check number 2172 in the amount of \$35.00 to cover the cost of filing.

Thank you for your attention to this matter.

Joseph & adams

Very truly yours,

Joseph E Adams
For the Firm

JEA/sdi

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: EAST GREENS CONDOMINIUM, INC.	
2. The principal office address: C/O MANAGEMENT PROFESSIONALS, INC.	
530 CONSTRUCTION LANE, LEHIGH ACRES, FL 33836	
3. The mailing address (if different): C/O MANAGEMENT PROFESSIONALS, INC.	_
P.O. BOX 1058, LEHIGH ACRES, FL 33970	_
4. Date of incorporation/qualification: 11/15/1971 Document number: 722090	_
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)	
SHIELDS, CHRISTOPHER, C/O PAVESE LAW FIRM	
1833 HENDRY STREET	
1833 HENDRY STREET FORT MYERS, FL 33901 The name and street address of the new registered agent (if changed) and (or registered office.	J
(if changed):	22) 20) 23)
BECKER & POLIAKOFF, PA	
12140 CARISSA COMMERCE COURT, SUITE 200	
FORT MYERS, FL 33912	
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.	
(Signification of director) Donna Burns-Russell (Printed or typed name and little)	
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.	
10/13/2021	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
Joseph F. Adams, Esquire	

Joseph E. Adams, Esquire (Typed or Printed Name)

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