## 725453

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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	į
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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PAChange News 2-14-11

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Golf Village Condominium Apartments, Inc
DOCUMENT NUMBER: 72 5453
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:
Mrsula Williams Name of Contact Person
Golf Village Condominium Apartments, Inc
24 Dockside Lane # 220 Address
Key Largo FL 35037 City State and Zip Code  Williams 7762 @ bell south net  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
Urs wa Williams  Name of Contact Person  at (305) 367-9911  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: <u>Folf Village Condominium Apartme</u> 2. The principal office address: <u>24</u> <u>Dock side Lane #220</u>
3. The mailing address (if different):
4. Date of incorporation/qualification: $2/2/1973$ Document number: $725453$
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)
Resigned: Richard Overfield
99411 Overseas Hwy
Key Largo, FL 3303/
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Ursula Williams
24 Dockside Lane #220 P.O. Box NOT acceptable
Key Largo, FL 33037
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.
M. William Signature of an officer or director 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.
U. Wellan 2/8/2011 Signature of Registered Agent Date
f signing on behalf of an entity:
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)