

725 574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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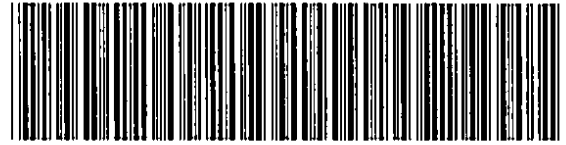
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

APR 12 2019

T SCHROEDER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GULF SHORES PROPERTY OWNERS ASSOCIATION, INC  
Name of Corporation

**DOCUMENT NUMBER:** 725574

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:

RICK NOTTAGE OR PATRICIA HEALEY  
Name of Contact Person

GULF SHORES PROPERTY OWNERS ASSOCIATION, INC  
Firm/Company

P.O. BOX 272  
Address

SANIBEL, FL 33957  
City/State and Zip Code

RNOT58385@AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICK NOTTAGE at ( 816 ) 682-3704  
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  
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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: GULF SHORES PROPERTY OWNERS ASSOCIATION, INC
2. The principal office address: P.O. BOX 272, SANIBEL, FL 33957
3. The mailing address (if different):
4. Date of incorporation/qualification: 05/11/1987 Document number:
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)

WILLIAM F. O'BRIEN
993 FISH CROW RD.
SANIBEL, FL 33957

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

RICK NOTTAGE
1060 WHITE IBIS DR.
SANIBEL, FL 33957

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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.

Patricia S. Healey
Signature of an officer or director

PATRICIA S. HEALEY
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.

Richard Nottage
Signature of Registered Agent

4-3-2019
Date

If signing on behalf of an entity:

Richard J Nottage
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE