728211

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(Requestor's Name)
(Address)
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PICK-UP	WAIT MAIL
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SIVISION OF CONTORATION 2023 OCT 23 PH I2: 40



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Whiskey Creek Civic Association, Corp. Name of Corporation

DOCUMENT NUMBER: 728211

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:

Melissa Metzger	
Name of Contact Person	
Whiskey Creek Civic Association, Corp.	
Firm/Company	
1449 whiskey Creek Drive	
Address	
Fort Myers, FL 33919	202
City/State and Zip Code	2023 OCT 23
melissa@palmparadiseteam.com	
E-mail address: (to be used for future annual report notification)	2 <u>2</u>
	P ^{NG}
For further information concerning this matter, please call:	р н 12: но 21:01:21:40
Melissa Metzger at (²³⁹) 851-1561	
Name of Contact Person Area Code & Daytime Teleph	one Number

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address:</u> 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

CR2E045 (04/13)

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

2. The principal office address: 1449 Whiskey Creek Drive, Fort Myers, FL 33919 3. The mailing address (if different):
3. The mailing address (if different):
4. Date of incorporation/qualification: Dec 7, 1973 Document number: 728211
 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)
Karen Tice
1449 Whiskey Creek Drive
Fort Myers, FL 33919
6. The name and street address of the new registered agent (if changed) and /or registered office
Melissa Metzger
P.O. Box NOT acceptable
1449 Whiskey Creck Drive P.O. Box NOT acceptable P.O. Box NOT acceptable NOT Fort Myers, FL 33919 Fort

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.

officer or director

Wyler Gins

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.

ignature of Registered Agent

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If signing on behalf of an entity:

Melissa Metzger

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 (04/13)