

733715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01/20/10
8/24/09
TW

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sea Shell Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 733715

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:

Kevin T. Wells, Esq.
Name of Contact Person

The Law Offices of Kevin T. Wells, P.A.
Firm/Company

1800 Second Street, Suite 803
Address

Sarasota, Florida 34236
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin T. Wells, Esq. at (941) 366-9191
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 12, 2009

KEVIN T WELLS, ESQ
1800 2 ST STE 803
SARASOTA, FL 34236

SUBJECT: SEA SHELL CONDOMINIUM ASSOCIATION, INC.
Ref. Number: 733715

We have received your document for SEA SHELL CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 009A00027518

RECEIVED
2009 AUG 20 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Sea Shell Condominium Association, Inc.

2. The principal office address: 6500 Midnight Pass Road, Sarasota, Florida 34242

3. The mailing address (if different): 6500 Midnight Pass Road, Sarasota, Florida 34242

4. Date of incorporation/qualification: 09/03/1975 Document number: 733715

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)

Kevin Wells P.A.

22 S. Links Avenue, Suite 301

Sarasota, Florida 34236

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

The Law Offices of Kevin T. Wells, P.A.

1800 Second Street, Suite 803

P.O. Box NOT acceptable

Sarasota, Florida 34236

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Estelle D. Debbane, Secretary Estelle D. Debbane, Sec.
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.

[Signature]
Signature of Registered Agent

7/6/09
Date

If signing on behalf of an entity:

Kevin T. Wells, Esq.
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)