2011-12-19 16:19 Bysiness Law Group 813/221 7999 >> 850-627-6381 P 1/3

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110002963073)))



H110002963073ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : BUSINESS LAW GROUP, P.A.

Account Number : I20110000022 Phone : (813)379-3804

Fax Number : (813)221-7909

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: mvakoti @ blawsroup. com

REGISTERED AGENT CHANGE

TEXTEZ OF CARROLLWOOD CONDOMINIUM ASSOCIATION,

INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

12-20-1/ 12/19/2011 813 221 7909 >> 850-617-6381 P 2/3 (((H11000296307 3)))

## **COVER LETTER**

TQ:	Amendment Section
	Division of Corporations

SUBJECT: Cortez of Carrollwo	Name of Corpo	pration	<u>011, 1110.</u>
DOCUMENT NUMBER:	746	864	
The enclosed Statement of Change of Re	gistered Office/Ag	ent and fee are subn	nitted for filing.
Please return all correspondence concerr			
·	Margo T. Valer	nti, FRP	
	Margo T. Valer Name of Contact	Person	•
	lusiness Law Gr	oup, P.A.	
	Firm/Comp	ony	
3	301 W. Platt Stre	eet, #375	
	Address		-
	Tampa, Florida City/State and Z	33606	
	•	•	
E-mail address: (to	valenti@blawgr	e annual report no	tification)
For further information concerning this i	natter, please call:		
Margo T. Valenti, FR	P a	( 813 <sub>)</sub>	379-3804 rtime Telephone Number
Name of Contact Person		Area Code & Day	time Telephone Number
Enclosed is a \$35.00 check made payabl	c to the Departmen	at of State.	
Mailing Address Amendment So Division of Co P.O. Box 6327	rporations	Street Address Amendment Division of C	Section Corporations
Tallahassee, Fi			ive Center Circle

CR2E045 (8/05)

Tallahassee. FL 32301

CR2E045 (8/05)

813 221 7909 >> 850-617-6381 P 3/3 (((H11000296307 3)))

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

statement of cha	inge is submitted for a cor	poration organized	07.1508, or 617.1508, Florid I under the laws of the State of Lacent, or both, in the State of	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: Cortez of Carrollwood Condominium Association, Inc.  2. The principal office address: 2870 Scherer Drive, Suite 100, St. Petersburg, FL 33716						
3. The mailing o	ddress (if different); Sam	e as above				
4. Date of incorp	poration/qualification:	4/24/79	_ Document number:	746864		
	i street address of the curre amont of State: (If resigner		and registered office on file	with the		
	Ronald E. Cotterill			_ <b>#</b>		
	1010 N. Florida Ave					
	Tampa, Florida 336	02		20 1		
6. The name and (if changed):	street address of the new	registered agent (is	*changed) and /or registered	MOEC 20 MID: 50		
	Business Law Group	o, P.A.		_ 智 5		
	320 W. Kennedy Blv	rd., Suite 400	an chia			
	Tampa, Florida 3360		paoc			
The street addre	ss of its registered office be identical.	and the street add	ress of the business office o	f its registered agent,		
Such change wa authorized by th	s authorized by resolution to board, or the corporation	n duly adopted by on has been notifie	its board of directors or by d in writing of the change.	an officer so		
Signally	My Dian	<del>-</del> -	Myrna Diaz, Pr	esident dulle		
I hereby accept I further acree to of my duties, an document is beli corporation has	the appointment as regist o comply with the provisi d I ani familiar with and ng filed merely to reflect been notified in writing o	ered agent and ag ons of all statutes accept the obligate a change in the re of this change.	ree to act in this capacity, relative to the proper and c ion of my position as registe gistered office address, I he	omplete performance red agent. Or, if this reby confirm that the		
	salure of Registered Agent	<del></del>	12/16/11			
If signing on bel	nalf of an entity:		•			
Bruce	M. Rodgers, Esquire	<del></del>				
	<b>*</b> % a	FILING FEE: S	35.00 * * *			

Make Checks payable to Florida Department of State Mail. to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

(((H11000296307 3)))