747805

(Re	questor's Name)	
(Ad	dress)	
(Address)		
(Cit	y/State/Zip/Phone #	7)
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

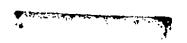
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JUL 20 Z018 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations			
Gulf and Bay Club Condominium Association, Inc.			
Name of Corporation			
DOCUMENT NUMBER: 747805			
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			
Law Offices of Wells Olah, P.A.			
Firm/Company			
1800 2nd Street, Suite 808			
Address			
Sarasota, Florida 34236			
City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
and the second s			
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			
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 Street Address: Amendment Section			
Division of Corporations Amendment Section Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle			
Tallahassee, FL 32301			

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

Pursuani 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: Gulf and Bay Club Condominium Association, Inc.
2. The principal office address: 5730 Midnight Pass Road, Sarasota, Florida 34242-3000
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 06/25/1979 Document number: 747805
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)
Wells, Kevin T. Esq.
1800 2nd Street 803
Sarasota, FL 34246
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Kevin T. Wells, Esq., Law Offices of Wells Olah, P.A.
1800 2nd Street, Suite 808 P.O. Box NOT acceptable
Sarasota, Florida 34236 ⊕ □
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.
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 me fely to reflect a change in the registered office address, I hereby confirm that the corporation has been not filed in writing of this change.
Signatury of Registered Agent 7-11-2018 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 (03/12)