

75/754

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(Business Entity Name)

(Document Number)

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C. [Signature]

3.22.10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Useppa Island Property Owners Association, Inc
Name of Corporation

DOCUMENT NUMBER: 751754

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:

Brian F. McColgan
Name of Contact Person

Useppa Island Property Owners Association, Inc.
Firm/Company

PO Box 640
Address

Bokeelia, FL 33922
City/State and Zip Code

brianmccolgan@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian McColgan at (239) 283-0230
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Useppa Island Property Owners Association, Inc.
2. The principal office address: 8115 Main Street
Bokeelia, FL 33922
3. The mailing address (if different): PO Box 640
Bokeelia, FL 33922
4. Date of incorporation/qualification: March, 1980 Document number: 751754
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)

Robert Long

2443 SW Pine Island Road

Cape Coral, FL 33991

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

Brian McColgan

8115 Main Street

P.O. Box NOT acceptable

Bokeelia, FL 33922

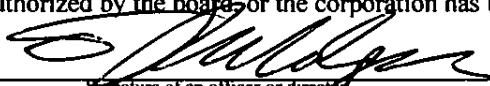
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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.


Signature of an officer or director

Brian F. McColgan, President
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 of Registered Agent

Brian F. McColgan
Date

If signing on behalf of an entity.

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