

752071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

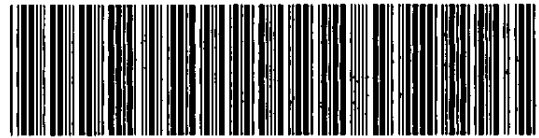
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

B.A.

TB

MAY 25 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cove Cay Village IV Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 752071

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:

Dan Botsford
Name of Contact Person

Cove Cay Village IV Condo. Assoc., Inc
Firm/Company

3500 Cove Cay Drive
Address

Clearwater, FL 33756
City/State and Zip Code

covecay.villageiv@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cathy Abbarno at (727) 535-5403
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: Cove Cay Village IV Condominium Association, Inc
- 2. The principal office address: 3500 Cove Cay Drive
Clearwater, Florida 33760
- 3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/17/1980 Document number: 752071

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)

Gerald Panagrossi
3500 Cove Cay Drive
Clearwater, Florida 33760

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

Dan Botsford
3500 Cove Cay Drive
P.O. Box NOT acceptable
Clearwater, Florida 33760

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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.

Doris Storwick TREASURER DORIS STORWICK TREASURER
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.

Dan Botsford May 19, 2010
Signature of Registered Agent Date

If signing on behalf of an entity:

Typed or Printed Name

***** FILING FEE: \$35.00 *****