

752582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 DEC 17 PM 4:07

APPROVED
AND
FILED

C. LEWIS
DEC 18 2013
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 3, 2013

DANIEL CLINE / SANDCASTLE PROPERTY MANAGEMENT & BROKERA
16266 SAN CARLOS BLVD SUITE 10
FT. MYERS, FL 33908

SUBJECT: MARINA TERRACE CONDOMINIUM ASSOCIATION, INC.
Ref. Number: 752582

We have received your document for MARINA TERRACE 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 213A00027485

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MARINA TERRACE CONDOMINIUM ASSOCIATION, INC

Name of Corporation

DOCUMENT NUMBER: 752582

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:

Daniel Cline

Name of Contact Person

SANDCASTLE PROPERTY MANAGEMENT & BROKERAGE

Firm/Company

16266 SAN CARLOS BLVD, SUITE 10

Address

FT MYERS, FL 33908

City/State and Zip Code

dan@sandcastlepmb.com

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

For further information concerning this matter, please call:

Daniel Cline

Name of Contact Person

at (239) 466-3330

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: Marina Terrace Condominium Association, Inc
2. The principal office address: 16266 San Carlos Blvd, Suite 10
Ft MYers, Fl 33908
3. The mailing address (if different): Same
4. Date of incorporation/qualification: _____ Document number: 752582

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)

Alliant Property Management, Inc

6719 Winkler Ave

Ft Myers, FL 33919

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

SANDCASTLE PROPERTY MANAGEMENT AND BROKERAGE LLC

16266 San Carlos Blvd, Suite 10

P.O. Box NOT acceptable

Ft Myers, Fl 33908

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.

Betty Hobbs
Signature of an officer or director

Betty Hobbs 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.

Daniel Cline
Signature of Registered Agent

11/20/2013
Date

If signing on behalf of an entity:

Daniel Cline
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)

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TALLAHASSEE, FLORIDA

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