

754573

(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

R.A. Chq.
C.COULLIETTE

AUG 05 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: STEAMBOAT BEND EAST CONDOMINIUM ASSN.
Name of Corporation

DOCUMENT NUMBER: 754573

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:

EDWARD S. BRAID

Name of Contact Person

BRAID ASSOCIATION MGT.

Firm/Company

9100 GREENLEAF CT.

Address

FT. MYERS, FL 33919

City/State and Zip Code

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

For further information concerning this matter, please call:

EDWARD S. BRAID

Name of Contact Person

at (239) 489-2209

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 27, 2011

EDWARD S. BRAID
BRAID ASSOCIATION MANAGEMENT
9100 GREENLEAF CT
FT MYERS, FL 33919

SUBJECT: STEAMBOAT BEND EAST CONDOMINIUM ASSOCIATION, INC.
Ref. Number: 754573

We have received your document for STEAMBOAT BEND EAST CONDOMINIUM ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 811A00017754

RECEIVED

11 AUG -5 AM 11:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: STEAMBOAT Bend East Condominium Association, Inc.

2. The principal office address: 4489 WINDJAMMER LANE
FT. MYERS, FL 33919

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/10/1980 Document number: 754523

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)

Beaio Assn. Mgt.
4489 WINDJAMMER LANE
FT. MYERS FL 33919

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

Beaio Association Management
9100 GREENLEAF CT.
FT. MYERS, FL 33919

P.O. Box NOT acceptable

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 merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Edward Bred CAM
Signature of Registered Agent

JULY 8, 2011
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

CR2E045 (8/05)

FILED
11 AUG 5 AM 11:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA