## 754905

:	(Requestor's Name)	
\$ :	(Address)	
- t - i	(Address)	
\$ 	(City/State/Zip/Phone	e #)
PICK-	UP WAIT	MAIL
f ,	(Business Entity Nar	me)
	(Document Number)	
Certified Copies _	Certificates	s of Status
Special Instruction Corper RIA	ins to Filing Officer:  The Curve of Cu	N <del>d</del>
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SECRETARY OF STATE
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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: LEMIN BAY BREEZES CONDOMINIUM ASSOCIATION (Name of corporation)	INC
DOCUMENT NUMBER:	يائسان ي
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:	
OSCAR A.F. KEUKER (Name of person)	÷
KEVKER TAY SERVICE INC (Name of firm/company)	
1931 TAMIAMI TRAIL ST&4 (Address)	, week as a
PORT CHARLOTTE FL 33948 (City/state and zip code)	an
For further information concerning this matter, please call:	
OS CAO A F. KEUKER at (941) 766-0635  (Name of person) (Area code & daytime telephone number)	
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399	

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

Pursuant to th	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
this statement	f 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: LEMON BAY BREEZES CONDOMINIUM ASSOCIATION 1:
2. The principa	office address: 1401 SO McCALL PD UNIT 309A
	ENGLEWOOD FL 34223
3. The mailing	address (if different):
	DCT > 10CD 75UCD5
4. Date of inco	poration/qualification: OCT 30, 1980 Document number: 754905
	d street address of the current registered agent and registered office on file with the rtment of State:
1	KEYS- CALDWELL INC.
;	1747 9 Tamiani Ir., #223
	VENICE FL
6. The name a	and street address of the new registered agent (if changed) and /or registered office (if A
changed):	
,	OSCAR A.F. KEUKER
} 	1931 TAMIAMI TRAIL STEY  (P.O. Box or personal mailbox NOT acceptable)
;	PORT CHARLOTTE FL 33948
The street addragent, as change	ess of its registered office and the street address of the business office of its registered "ed will be identical.
Such change wauthorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
- グレン	DINE SEWELL PRESIDENT
I hereby accept further agree performance of registered ages office address.	the appointment as registered agent and agree to act in this capacity. to somply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as I Or, if this dodunery is being filed merely to reflect a change in the registered I hereby confirm that the corporation has been notified in writing of this change.
	ignature of Registered Agent)  G-23-03  (Date)
If signing on beha	
- : 7	(Voted or Printed Name) (Capacity)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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