## 756148

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## **COVER LETTER**

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

**70:** 

Amendment Section

## 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: The Binnacle Club, Inc.
2. The principal office address: C/o Coastal Property Management of SW Florida, Inc. 501 Goodlette Rd. N, Ste.A-206, Naples, FL 34102
3. The mailing address (if different):
4. Date of incorporation/qualification: 02/02/1981 Document number: 756148
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Moore Property Management, LLC
745 12th Avenue South
Naples, FL 34102
745 12th Avenue South  Naples, FL 34102  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Coastal Property Management of SW Florida, Inc.
Coastal Property Management of SW Florida, Inc.
501 Goodlette Rd. N, Ste.A-206
(P.O. Box NOT acceptable)  Naples, FL 34102
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.
Office of director)  POLLY BARTON, VICE PRESIDENT  (Printed or typed name and little)
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 Jam Jamiliar 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) (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)