

762119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

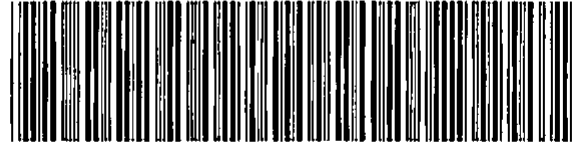
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 20 2018  
T. LEBREUX

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Green Dolphin Park Villas Condominium Association, Inc.

Name of Corporation

**DOCUMENT NUMBER:** 762119

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:

**Kimberly Bennett**

Name of Contact Person

**Toucan Property Management**

Firm/Company

**1301 Golfview Dr.**

Address

**Tarpon Springs, FL 34689**

City/State and Zip Code

**kim@toucanpm.com**

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

For further information concerning this matter, please call:

**Kim Bennett**

Name of Contact Person

at ( **727** ) **935-5007**

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: Green Dolphin Park Villas Condominium Association, Inc.  
2. The principal office address: 1301 Golfview Dr., Tarpon Springs, FL 34689

3. The mailing address (if different): Same as above.

4. Date of incorporation/qualification: 1-27-1982 Document number: 762119

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)

Kimberly Bennett

1816 Golfview Dr.

Tarpon Springs, FL 34689

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

Kimberly Bennett

1301 Golfview Dr.

P.O. Box NOT acceptable

Tarpon Springs, FL 34689

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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.

Marguerite Mauradian  
(Signature of an officer or director)

Marguerite Mauradian, 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.*

Kimberly Bennett  
Signature of Registered Agent

6-17-19  
Date

If signing on behalf of an entity:

Toucan Property Management Inc.

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)