

763247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

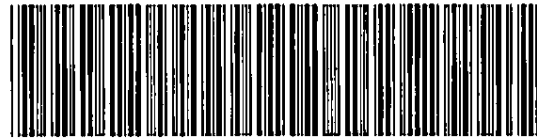
(Business Entity Name)

(Document Number)

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Amend

NOV 09 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Dan's Island 1660 Condominium Association, Inc.

DOCUMENT NUMBER: 763247

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steve Delach

(Name of Contact Person)

James R. De Furio, P.A.

(Firm/ Company)

201 E Kennedy Blvd, Suite 775

(Address)

Tampa, FL 33602

(City/ State and Zip Code)

steve@jamesdefurio.com

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

For further information concerning this matter, please call:

Steve Delach

813

229-0160

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

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

NOV 05 2018

October 31, 2018

STEVE DELACH
JAMES R. DeFURIO, P.A.
201 E. KENNEDY BLVD - STE. 775
TAMPA, FL 33602

SUBJECT: DAN'S ISLAND 1660 CONDOMINIUM ASSOCIATION, INC.
Ref. Number: 763247

We have received your document for DAN'S ISLAND 1660 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):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

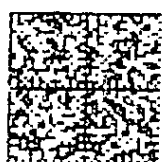
Irene Albritton
Regulatory Specialist II

Letter Number: 618A00022480

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2018 NOV -8 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FL

James R. DeFurio P.A.
P.O. Box 172717
Tampa, FL 33672

James R. De Furio, P.A.
P.O. Box 172717
Tampa, FL 33672-0717



UNITED STATES POSTAGE
5000.68

Articles of Amendment
to
Articles of Incorporation
of

Dan's Island 1660 Condominium Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

763247

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS) N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX) N/A

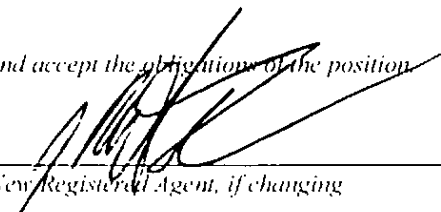
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: James R. De Furio P.A.
201 E Kennedy Blvd, Suite 775
(Florida street address)

New Registered Office Address:
Tampa, Florida 33602
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P - President; V - Vice President; T - Treasurer; S - Secretary; D = Director; TR - Trustee; C - Chairman or Clerk; CEO = Chief Executive Officer; CFO - Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	<u>P</u>	<u>Therese Beatty</u>	<u>1600 Gulf Boulevard</u>
<input type="checkbox"/> Add			<u>#614</u>
<input type="checkbox"/> Remove			<u>Clearwater, FL 33767</u>
2) <input type="checkbox"/> Change	<u>V</u>	<u>David MacNeil</u>	<u>1600 Gulf Boulevard</u>
<input checked="" type="checkbox"/> Add			<u>#818</u>
<input type="checkbox"/> Remove			<u>Clearwater, FL 33767</u>
3) <input checked="" type="checkbox"/> Change	<u>T</u>	<u>Michael First</u>	<u>1600 Gulf Boulevard</u>
<input type="checkbox"/> Add			<u>#511</u>
<input type="checkbox"/> Remove			<u>Clearwater, FL 33767</u>
4) <input type="checkbox"/> Change	<u>T</u>	<u>William Brancaccio</u>	<u>1600 Gulf Boulevard</u>
<input type="checkbox"/> Add			<u>#214</u>
<input checked="" type="checkbox"/> Remove			<u>Clearwater, FL 33767</u>
5) <input type="checkbox"/> Change	<u>D</u>	<u>Gregory Gaylor</u>	<u>1600 Gulf Boulevard</u>
<input checked="" type="checkbox"/> Add			<u>#417</u>
<input type="checkbox"/> Remove			<u>Clearwater, FL 33767</u>
6) <input type="checkbox"/> Change	<u>V</u>	<u>Betty Smith</u>	<u>1600 Gulf Boulevard</u>
<input type="checkbox"/> Add			<u>#816</u>
<input checked="" type="checkbox"/> Remove			<u>Clearwater, FL 33767</u>

N/A

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 10-18-18

Signature Theresa Beatty
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Theresa Beatty
(Typed or printed name of person signing)

President
(Title of person signing)