

763931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SEP 13 2013
13 SEP 13 AM 9:10

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(10 9.20.13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Condominium Association of Siesta Pines, Inc.
Name of Corporation

DOCUMENT NUMBER: 763931

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:

ELAINE PIERRO
Name of Contact Person

TURNKEY ASSOC. MGMT.
Firm/Company

15880 SUMMERLIN RD #300 - BOX 192
Address

FORT MYERS, FL 33908
City/State and Zip Code

elaine@turnkeyfl.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELAINE PIERRO at (239) 322 4788
Name of Contact Person 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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Condominium Association of Siesta Pines, Inc.
2. The principal office address: 11595 Kelly Rd #120-A
Fort Myers, FL 33908
3. The mailing address (if different): 15880 Summerlin Rd #300, Box 192
Fort Myers, FL 33908
4. Date of incorporation/qualification: 12/10/82 Document number: 763931
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)

PAUL SAPP - P+M Property Mgmt
14360 S. TAMiami Trail - Unit B
Fort Myers, FL 33912

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

Turnkey Association Management, LLC
11595 Kelly Rd #120-A
P.O. Box NOT acceptable
Fort Myers, FL 33908

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.

Richard Wallin
Signature of an officer or director

Richard Wallin
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.

Elaine Pierro
Signature of Registered Agent

8-1-13
Date

If signing on behalf of an entity:

Elaine Pierro
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)

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