# 768762

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Island Park Village, Section II, Condominium Association, Inc.

Name of Corporation

769762

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:

### Roman Mueller, CAM

Name of Contact Person

#### **Broadway Association Management**

Firm/Company

12811 Kenwood Lane, Suite 102

Address

Fort Myers, FL 33907

City/State and Zip Code

#### ken@bamfla.com

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

For further information concerning this matter, please call:

Roman Mueller, CAM

.,239

728-6100

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

-CR2E045 (03/12)

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

statement of ch	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of Florida der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: Island Park Village, Section II, Condominium Association, I	nc
2. The principa	al office address: c/o Broadway Association Management  Kenwood Lane, Suite 102, Fort Myers, FL 33907	
3. The mailing	address (if different):	
4. Date of incom	orporation/qualification: 06/03/1983 Document number: 768762	
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Condo & HOA Law Group	
	2030 McGregor Blvd.	
	Fort Myers, FL 33901	
6. The name an (if changed):		
	Becker & Poliakoff, PA	7
	3111 Stirling Road 呈	λÝ
	P.O. Box NOT acceptable  Fort Lauderdale, FL 33312-6525	
The street addr	ress of its registered office and the street address of the business office of its registered agent, ll be identical.	
Such change w authorized by t	vas authorized by resolution duly adopted by its board of directors or by an officer so the corporation has been notified in writing of the change.	
Signati	ture of an officer or director  ROMAN MUELLER  Printed or typed name and title	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	of the appointment as registered agent and agree to act in this capacity.  It to comply with the provisions of all statutes relative to the proper and complete  If my duties, and I am familiar with and accept the obligation of my position as registered  his document is being filed merely to reflect a change in the registered office address, I  If that the corporation has been notified in writing of this change.	
· K /	Mylle 06/21/12	
	ignature of Registered Agent Date	
Roman be	rehalf of an entity: AN MUELLER	
7	Typed or Printed Name	

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