

770205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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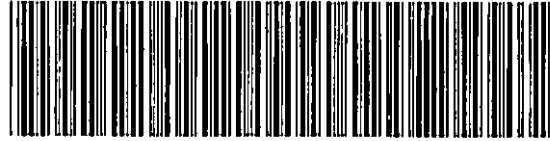
(Business Entity Name)

(Document Number)

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FEB 20 2019

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Tealbar Pointe Condominium Association  
Name of Corporation

**DOCUMENT NUMBER:** 770205

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:

Kelly A. Moran

Name of Contact Person

Resource Property Management

Firm/Company

7300 Park Street

Address

Seminole, FL 33777

City/State and Zip Code

kmoran@resourcepropertymgmt.com

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

For further information concerning this matter, please call:

Kelly A. Moran

Name of Contact Person

at ( 727 ) 796-5900

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: Feather Pointe I Condominium Association, Inc.
2. The principal office address: 7300 Park Street  
Seminole, FL 33277
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 9/13/1983 Document number: 770205

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)

Sentry Management, Inc.  
2180 West SR 434, Suite 5000  
Longwood, FL 32779

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

Cianfrone, Nikoloff, Grant & Greenberg, P.A.  
1964 Bayshore Boulevard, Suite A  
P.O. Box NOT acceptable  
Dunedin, FL 34698

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.

[Signature]  
Signature of an officer or director

Margaret Anne Tennant, VP  
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.*

[Signature]  
Signature of Registered Agent

January 4, 2019

Date

If signing on behalf of an entity:

Daniel J. Greenberg  
Typed or Printed Name

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