K60515

(Requestor's Name)							
(Address)							
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(2) 10) 17 (2)							
(City/State/Zip/Phone #)							
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(Business Entity Name)							
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29/10

COVER LETTER

Division of Corporations North Naples Realty Company SUBJECT:_ Name of Corporation K60515 **DOCUMENT NUMBER:** 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: Shirley Brunet Name of Contact Person **Landon Companies** Firm/Company 21 East Long Lake Road, Suite 100 Address Bloomfield Hills MI 48304 City/State and Zip Code sjbrunet@landoncompanies.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Shirley Brunet** Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address: Street Address:** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

TO:

Amendment Section

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

statement of cha	provisions of sections 60 ange is submitted for a co er to change its registered	orporation organized	under the laws of	the State of Flo	rida	_
1. The name of	the corporation: North	Naples Realty	/ Company			
2. The principal	office address: 21 Eas	t Long Lake Roa	ad, Suite 100			
	Bloomfield Hills	МІ	48304			
3. The mailing a	address (if different): 21	East Long Lake	Road, Suite 10	00		
	Bloomfield Hills	МІ	48304			
4. Date of incorp	poration/qualification:	01/23/1989	_ Document numb	er: K	60515	
	I street address of the current of State: (If resign		t and registered offi	ice on file with the	:	
	Corporation Service Company				2010 SF(
	1201 Hays Street			L AF		77
	Naples, FL 34103			ASS	8-8 8-8	
6. The name and (if changed):	d street address of the new	w registered agent (it	f changed) and /or r	registered office	AM II: 02	
	Janet Aronoff	7			[™] ਨ	
	626 Gulf Shore B					
	Naples, FL 34102	P.O. Box NOT acc	eptable			
The street address changed will	ess of its registered office be identical.	ce and the street add	ress of the busines	ss office of its reg	istered ag	ent,
	as authorized by resolut bard, if the corpora					
Signatu	re of an efficer or director			Aronoff, Presic	dent	
I hereby accept I further agree of my duties, an document is bel corporation ha	the appointment as reg to comply with the prov ad I am familiar with an ing filed merely to reflect s been notified in writin	istered agent and a isions of all statutes d accept the obligat ct a change in the re g of this change.		1 /	e perform ent. Or, ij nfirm thai	ance f this t the
Sig	mature of Registered Agent			28 2010 Date		
	chalf of an entity:					
Т	'yped or Printed Name					

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