

N 00000007691

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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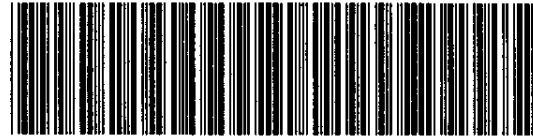
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2013

PATRICIA DUBUQUE
RAMPART PROPERTIES, INC.
9887 FOURTH ST. NORTH, #301
ST. PETERSBURG, FL 33702

SUBJECT: PALMER SQUARE WEST NO. 3 CONDOMINIUM ASSOCIATION,
INC.
Ref. Number: N00000007691

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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.

Darlene Connell
Regulatory Specialist II

Letter Number: 713A00024353

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PALMER SQUARE WEST NO. 3 CONDOMINIUM ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N00000007691

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:

PATRICIA DUBUQUE

Name of Contact Person

RAMPART PROPERTIES, INC

Firm/Company

9887 FOURTH STREET NORTH, SUITE 301

Address

ST. PETERSBURG, FL 33702

City/State and Zip Code

DDANYS@RAMPARTPROPERTIES.COM

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

For further information concerning this matter, please call:

PATRICIA DUBUQUE

Name of Contact Person

at (**727**) **577-2200**

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: Palmer Square West NO. 3 Condominium Association, Inc.
2. The principal office address: 9887 Fourth Street North, Suite 301
ST. PETERSBURG, FL 33702
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 9/5/2000 Document number: N00000007691
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)
CASY MANAGEMENT, INC.
4730 SOUTH TAMIAMI TRAIL, SUITE 102
SARASOTA, FL 34231

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
ASSOCIA GULF COAST, INC.
9887 Fourth Street North, Suite 301
P.O. Box NOT acceptable
ST. PETERSBURG, FL 33702

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 of an officer or director

FOREST HINKEL President

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 of Registered Agent

1/13/14
Date

If signing on behalf of an entity:

Associa Gulf Coast
Typed or Printed Name

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