NO100000290

(Requestor's Name)						
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(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
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COVER LETTER

TO:	Amendment Section Division of Corporations					
SUBJ	Olympia Park Owners' A Name of Corp					
DOCU	UMENT NUMBER: NO100	0000290				
The en	nclosed Statement of Change of Registered Office/A	gent and fee are subm	nitted for filing.			
Please	e return all correspondence concerning this matter to	the following:				
	Glenn Ca Name of Conta					
R & P Property Management Firm/Company						
265 Airport Rd. s Address						
	Naples, FL City/State and 2	34104 Zip Code	- 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2			
	gcarroll@rp-pr	op.com	•			
	E-mail address: (to be used for futu	re annual report not	ification)			
For fur	rther information concerning this matter, please call	:				
	Glenn Carroll	at (239)	643-3353			
	Name of Contact Person	Area Code & Day	643-3353 time Telephone Number			
Enclos	sed is a \$35.00 check made payable to the Departme	ent of State.				
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327- Tallahassee, FL 32314	Street Address Amendment S Division of C Clifton Build 2661 Executi Tallahassee.	Section forporations ing ve Center Circle			

. . $\$ STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted for a co	rporation organized	107.1508, or 617.1508, Flo I under the laws of the Stat I agent, or both, in the Stat	te of Florida
1. The name of	the corporation: Olymp	oia Park Owne	ers' Association, In	IC.
	office address: 265 Air			
3. The mailing a	address (if different): 26	Airport Rd. So	uth Naples, FL 34104	L
4. Date of incorp	poration/qualification:	01/10/2001	Document number:	N01000000290
	d street address of the cur trnent of State: (If resign		t and registered office on fi	ile with the
	Stephen Pistner		·	
	10 Seagate Dr. PH	1N		
	Naples, FL 34103			
6. The name and (if changed):	I street address of the nev	v registered agent (i	f changed) and /or registere	ed office 3
	R & P Property Ma	nagement		
	265 Airport Rd. S			
	Naples, FL 34104	P.O. Box NOT acc	eptable	THE NO.
The street addre		e and the street add	lress of the business office	o of its registered agent
as changed will	be identical.	_		
Such change was authorized by the	as authorized by resoluting board, or the corporat	on duly adopted by ion has been notific	vits board of directors or led in writing of the chang	by an officer so e.
Signatu	re of an officer or difector	<u> </u>	Scott T	rue
I herebycoccept I further agree to of my duties, and document is bei corporation has	the appointment as regi to comply with the provi d I am familiar with and ng filed merely to reflec s been notified in writing	stered agent and a sions of all statutes l accept the obliga t a change in the re t of this change.	gree to act in this capacit i relative to the proper an tion of my position as reg gistered office address, I	y, d complete performance istered agent. Or, if this hereby confirm that the
Hen	n famille		10/25/11	
_	nature of Registered Agent		Date	
It signing on be	half of an entity:			
T	Glenn Carroll yped or Printed Name			

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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