1101000008452

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
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RATIONS

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R.A.

T. BROWN

COVER LETTER

TO:

Amendment Section Division of Corporations

Tivoli Residents' Association, Inc.

N01000008452

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:

Wendy Murray

Name of Contact Person

Associa Gulf Coast

Firm/Company

13461 Parker Commons Blvd #101

Address

Fort Myers, FL 33912
City/State and Zip Code

dracine@associagulfcoast.com

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

For further information concerning this matter, please call:

ianne Racine

Name of Contact Person

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

statement of change is submitted for a corpora	12, 617.0502, 607.1508, or 617.1508, Florida Statutes, this attion organized under the laws of the State of Florida e or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Tivoli Re	sidents' Association, Inc.	
	cia Gulf Coast, 13461 Parker Commor	ıs Blvd
#101 Fort Myers, FL		
3. The mailing address (if different): C/O As	socia Gulf Coast, 13461 Parker Commoi	ns Blvd
#101 , Fort Myers, F		
4. Date of incorporation/qualification: 12/0	4/2001	52
	egistered agent and registered office on file with the	
Associa Gulf Coas	st	
12650 Whitehall D	rive	
Fort Myers, FL 339	907 %	SIVIE 33S,
6. The name and street address of the new regi (if changed):	stered agent (if changed) and /or registered office	SHETARN OF C
Associa Gulf Coas	st	
13461 Parker Con		
Fort Myers, FL 33	P.O. Box NOT acceptable	<u> </u>
The street address of its registered office and as changed will be identical.	the street address of the business office of its registered a	gent,
Such change was authorized by resolution du authorized by the board, or the corporation has	ly adopted by its board of directors or by an officer so as been notified in writing of the change.	
Signature of arrotticer or director	Rick Bechtel, Agent	
I hereby accept the appointment as registered I further agree to comply with the provisions performance of my duties, and I am familiar agent. Or, if this document is being filed men hereby confirm that the corporation has been	of all statutes relative to the proper and complete with and accept the obligation of my position as registered rely to reflect a change in the registered office address, I	d
/////	6/12/12	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Wendy Murray Typed or Printed Name		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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