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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Victoria Shores Condominium Association of Pinellas				
Na	me of Corporation			
DOCUMENT NUMBER:	N02000003074			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this	s matter to the following:			
Joseph	R. Cianfrone, Esq.			
Joseph R. Cianfrone, Esq. Name of Contact Person				
Joseph R. Cianfrone, P.A.				
	Firm/Company			
1964 Bays	hore Boulevard, Suite A			
-	Address			
Dur	nedin, FL 34698			
Dunedin, FL 34698 City/State and Zip Code				
atternavias@sel.com				
attorneyjoe@aol.com E-mail address: (to be used for future annual report notification)				
,				
For further information concerning this matter, please call:				
Joseph R. Cianfrone, Esq.	at (727) 738-1100			
Name of Contact Person	at (727) 738-1100 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address:	Street Address:			
Amendment Section	Amendment Section			
Division of Corporat	ions Division of Corporations			
P.O. Box 6327	Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

CR2E045 (8/05)



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

statément of chan	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of th	the corporation: Victoria Shores Condominium Association of Pinellas,	Inc.
2. The principal o	office address: 1135 Victoria Drive	
<u> </u>	Dunedin, FL 34698	
3. The mailing ad	ddress (if different):	
4. Date of incorpo	poration/qualification: 04/25/2002 Document number: N0200003074	
	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)	
<u>-</u>	R. Carlton Ward	••
_	1253 Park Street	
-	Clearwater, FL 33756	
6. The name and : (if changed):	I street address of the new registered agent (if changed) and /or registered office	
<u>-</u>	Joseph R. Cianfrone, Esq.	
-	1964 Bayshore Boulevard, Suite A P.O. Box NOT acceptable	-
<u> </u>	Dunedin, FL 34698	
The street address as changed will be	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Signature	re of the ordifector Printed or typed name and title	٤S
I hereby accept to I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this am filed merely to reflect a change in the registered office address, I hereby confirm that the s been nowfied in writing of this change.	2 S
Jy Signa	nature of Registered Agent Dave	
If signing on beh	hal of an entity:	
	ph R. Cianfrone, Esq.	

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 * * *