N02000008415

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	÷#)
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SECRETARY OF STATE.

TALLAHASSEF. F. SATE.

R.A.

1Brown 7-7-11



Becker & Poliakoff Building 12140 Carissa Commerce Court, Suite 200 Ft. Myers, Florida 33966 Phone: (239) 433-7707 Fax: (239) 433-5933

999 Vanderbilt Beach Road, Suite 501 Naples, Florida 34108 Phone: (239) 552-3200 Fax: (239) 514-2146

ADMINISTRATIVE OFFICE

3111 STIRLING ROAD FORT LAUDERDALE, FL 33312 954.987.7550

July 1, 2011

Reply To: Fort Myers JAdams@becker-poliakoff.com

WWW.BECKER-POLIAKOFF.COM BP@BECKER-POLIAKOFF.COM

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Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Garden Lakes at Colonial Section I Condominium Association, Inc. Re:

To Whom It May Concern:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above-referenced Association. Also enclosed please find check number 201008 in the amount of \$35.00 to cover the cost of filing.

Thank you for your attention to this matter.

Very truly yours,

For the Firm

Enclosures (as stated)

JEA/sdc

ACTIVE: 3415162_1

U.S. & GLOBAL OFFICES

WEST PALM BEACH

RED BANK, NEW JERSEY

NEW YORK, NEW YORK

NASSAU, BAHAMAS

PRAGUE, CZECH REPUBLIC

^{*} by appointment only

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: Garden Lakes at Colonial Section I Condominium Associa	ation, Inc.
2. The principal office address: <u>c/o Compass Management Group</u>	
3701 North Tamiami Trail, Naples, FL 34103	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/31/2002 Document number: N02000008415	
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)	
Jason Mikes	
999 Vanderbilt Beach Rd, Suite 501	2
Naples, FL 34108	
6. The name and street address of the new registered agent (if changed) and /or registered office	5
Becker & Poliakoff, P.A.	SH KS
999 Vanderbilt Beach Road, Suite 501 (P.O Box NOT acceptable)	25
Naples, FL 34108	
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	d agent,
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) NOORE (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 perform duties, and I am familiar with and accept the obligation of my position as registered agent. Of document is being filed merely to reflect a change in the registered office address, I hereby confirm corporation has been notified in writing of this change.	ormance r, if this that the
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
Joseph E. Adams (Typed or Printed Name)	

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