

ND3000003850

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

R+A/change  
@ 9/30/11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Cypress Lake Office Center Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N03000003850

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:

JOHN M. WICKER, ESQ.  
Name of Contact Person

JOHN M. WICKER, P.A.  
Firm/Company

PO DRAWER 60205  
Address

FORT MYERS, FL 33906  
City/State and Zip Code

FRANS@LAWCRW.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN M. WICKER, ESQ. at ( 239 ) 939-2222  
Name of Contact Person 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: Cypress Lake Office Center Association, Inc.
2. The principal office address: 12811 Kenwood Lane, Suite 115, Fort Myers, FL 33907
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 5-6-2003 Document number: N03000003850
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)

Truman J. Costello

12670 New Brittany Blvd. #101, Fort Myers, FL 33907

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

John M. Wicker, Attorney  
12670 New Brittany Blvd. Suite 101  
P.O. Box NOT acceptable  
Fort Myers, FL 33907

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 the officer or director

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

Date

If signing on behalf of an entity:

John M. Wicker

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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