

N0300000043D9

(Requestor's Name)

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(Business Entity Name)

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DIVISION OF CORPORATIONS
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@ 6/17/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Olds Marco Condominium Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N03000004309

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 Ladner
(Name of Contact Person)

Gulfshore Property Mgmt.
(Firm/Company)

P.O. Box 1819
(Address)

Marco Island, FL 34146
(City/State and Zip Code)

For further information concerning this matter, please call:

John Ladner at (239) 440-3260
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 2, 2008

JOHN LADNER
GULFSHORE PROPERTY MGMT.
P.O. BOX 1819
MARCO ISLAND, FL 34146

SUBJECT: OLDE MARCO CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N03000004309

We have received your document for OLDE MARCO CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Date of Incorporation is May 13, 2008.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 408A00034262

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Older Marco Condominium Association, Inc.
2. The principal office address: 731 W. Elkham Cir. A-108,
Marco Island, FL 34145
3. The mailing address (if different): P.O. Box 1819, Marco Island,
FL 34145
4. Date of incorporation/qualification: May 13, 2008 Document number: NO3000004309
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Woodward Craig
606 Bald Eagle Dr. #500
Marco Island, FL 34145

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

John Hedner
ELKHAM
731 W. Elkham Cir A-108
(P.O. Box NOT acceptable)
Marco Island, FL 34145

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.

X [Signature]
(Signature of an officer or director)

X Elizabeth Hunsauer
(Printed or typed name and title)
Treasurer/Secretary

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]
(Signature of Registered Agent)

5/19/08
(Date)

If signing on behalf of an entity:

(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

CR2E045 (8/05)

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DIVISION OF CORPORATIONS
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