

1/023000009084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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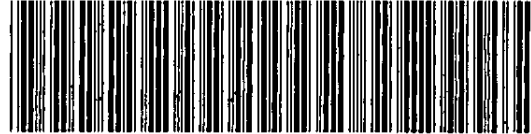
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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7-304

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: Key Royal Condo Assoc.  
(Name of Corporation)

DOCUMENT NUMBER: NO3000009084

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 Goede  
(Name of Contact Person)

John Goeda PA  
(Firm/Company)

9915 Tamiami Trail N STE 1  
(Address)

NAPLES, FL 34108  
(City/State and Zip Code)

For further information concerning this matter, please call:

John Goede at (239) 465-4402  
(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 16, 2008

JOHN GOEDE  
JOHN GOEDE P.A.  
9915 TAMiami TRAIL N STE 1  
NAPLES, FL 34108

SUBJECT: KEY ROYAL CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: N03000009084

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

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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) 245-6908.

Sylvia Gilbert  
Regulatory Specialist II

Letter Number: 208A00036643

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**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: Key Royal Condominium Association, Inc  
2. The principal office address: 8204 Key Royal Circle  
NAPLES, FL 34119  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 10/17/03 Document number: NO300009084

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Presidio Realty Inc.  
2909 W Bay to Bay Blvd STE 202  
TAMPA, FL 33629

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

John Goede PA  
9915 TAMiami TRAIL N. Suite 1  
(P.O. Box NOT acceptable)  
NAPLES, FL 34103

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.

Joseph Kalinowski  
(Signature of an officer or director)

Joseph Kalinowski Pres  
(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]  
(Signature of Registered Agent)

6/19/2008  
(Date)

If signing on behalf of an entity:

JOHN C. GOEDE, ESQ.  
(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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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