(Requestor's Name)		
(Address)	1001866488	
(City/State/Zip/Phone #)		
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(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status	3 77.	
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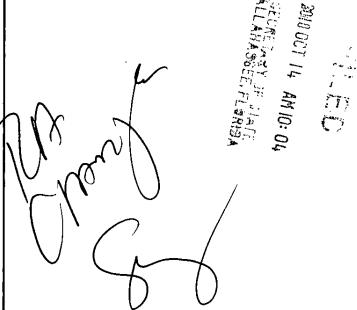
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**2310.00



COVER LETTER

Division of Corporations SUBJECT: Condominium Owners Association of Governors Island Name of Corporation N03546 DOCUMENT NUMBER:_ 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: Michael Yelton Name of Contact Person Benson's, Inc. Firm/Company 12650 Whitehall Drive Address Fort Myers, FL 33907 City/State and Zip Code dracine@bensonsinc.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Dianne Racine Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: **Mailing Address:** Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

CR2E045 (8/05)

TO:

Amendment Section

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

statement of ch	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida on organized under the laws of the State of _ or registered agent, or both, in the State of l	Florida
1. The name of	the corporation: Condominiu	um Owners Association of Go	vernors Island, Inc.
	office address: 12650 Whiteh	nall Drive	
			
3. The mailing	address (if different):		
4. Date of incom	rporation/qualification:6/8	/1984 Document number:	N03546
	nd street address of the current reginartment of State: (If resigned, enter	istered agent and registered office on file wi r resigned)	ith the
	Bonita D. Vandall		_
	12650 Whitehall Drive		_
	Fort Myers, FL 33907		— theri
6. The name an (if changed):		ered agent (if changed) and /or registered of	fice AHAB
	Benson's, Inc.		
	12650 Whitehall Drive		- RAID
	Fort Myers, FL 33907	O. Box NOT acceptable	IO: O4
The street addr as changed wil	ress of its registered office and the	ne street address of the business office of i	ts registered agent,
Such change wanthorized by t	vas authorized by resolution duly the board, or the corporation has	adopted by its board of directors or by ar been notified in writing of the change.	officer so
X Carre	UC Do Vala ure of an officer or director	DISTRIBLE . D.	
I hereby accept I further agree of my duties, at document is be corporation ha	t the appointment as registered of to comply with the provisions of nd I am familiar with and accept ing filed merely to reflect a chan is been notified in writing of this	agent and agree to act in this capacity. f all statutes relative to the proper and con t the obligation of my position as registere age in the registered office address, I here change.	nplete performance ed agent. Or, if this by confirm that the
11/	ila fettor	8-9-10	
I Sig	gnature of Registered Agent	Date	
If signing on b	ehalf of an entity:		
-	Michael Yelton Typed or Printed Name	_	
•	- 1 h 21 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

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