## NO4000000664

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
•	•	
709	w/Otata/7in/Diamo	- 40
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(De	ocument Number)	
(2.0		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
·	,	
		,

Office Use Only



900131048329

06/26/08--01014--028 \*\*35.00

JECHETARY OF STATE AT LATER OF STATE

Ox Azor

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: THE SANCTUARY AT IMPERIAL RIVER CONDOMINIUM ASSOCIATION, INC. (Name of Corporation)
DOCUMENT NUMBER: N0400000664
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 C. Goede, Esq
(Name of Contact Person)
John C. Goede, P.A.  (Firm/Company)
(Prints Company)
9915 Tamiami Trail North, Suite #1 (Address)
(Address)
Naples, Florida 34108
(City/State and Zip Code)
For further information concerning this matter, please call:
John C. Goede, Esq at ( 239 ) 331-5100
John C. Goede, Esq at (239) 331-5100  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:

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
in order to change its registered office or registered agent, or both, in the State of Florida.
The name of the corporation: Sanctuary at Imperial River Condominium Association, Inc.
2. The principal office address: 8675 RIVER HOMES LANE, BONITA SPRINGS FL 34135
3. The mailing address (if different): 396 ALHAMBRA CIRCLE, SUITE 230, CORAL GABLES, FL 33134
4. Date of incorporation/qualification: 01/16/2004 Document number: 700025712827
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
ADAMS, JOSEPH E ESQ
BECKER & POLIAKOFF, P.A.
14241 METROPOLIS AVENUE. SUITE 100 FORT MYERS FL 33912   累了
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
John C. Goede, Esq
9915 Tamiami Trail North, Suite 1
(P.O. Box NOT acceptable) Naples, Florida 34108
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 an officer or director)  THERESO A: Wingot - SELVETARY (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 their 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 Pregistered Agent) (Date)
If signing on behalf of an entity:
John C. Goede  (Typed or Printed Name)

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