## ND400002353

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	<del>•</del> #)
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Amend 12/1/1

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

•		•
NAME OF CORPORATION: Park Central North C	)wner's Association, Inc.	
DOCUMENT NUMBER: <u>N04000002353</u>	·	
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
•	•	
Please return all correspondence concerning this matter	er to the following:	
Marc F. Oates		
(Nam	e of Contact Person)	
Park Central North Owner's Association, Inc.		
	Firm/ Company)	
,	· ····································	
6616 Days - D. Las Outs - 600		
5515 Bryson Drive, Suite 502	(4.11)	
	(Address)	
Naples, Florida 34109	<del></del>	
(City/	State and Zip Code)	
nnfc@comcast.net		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	ooll.	
To further information concerning this matter, please	call:	
Brian Bozza	at (_239	_) 596-7731
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made page	vable to the Florida Depa	artment of State:
pu	y abio to the Florida Dept	in the state.
☑ \$35 Filing Fee □\$43.75 Filing Fee & I	□\$43.75 Filing Fee &	□\$52.50 Filing Fee
Certificate of Status	Certified Copy	Certificate of Status
	(Additional copy is	Certified Copy
	enclosed)	(Additional Copy is
		enclosed)
Mailing Address	Street	<u>Address</u>
Amendment Section		ment Section
Division of Cornorations		n of Cornorations

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with the Florida D	ept. of State)	<u> </u>	-
Park Central North Owner's Association, Inc.	NOTODI	10023	53_	_
(Document Number of Corpo	ration (if known)		- -	_
Pursuant to the provisions of section 617.1006, Florida Statut following amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For I</i>	Profit Corporati	on adopts the	e
A. If amending name, enter the new name of the corpora	tion:			
The new name must be distinguishable and contain the word "Corp." or "Inc." <u>"Company" or "Co." may not be used in</u>		orated" or the o	abbreviation	<u>-</u>
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>	)			_
				_
C. Enter new mailing address, if applicable:				_
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )				-₩
			<u>8</u>	101S
			128	유
		<del></del>		- CO2
D. If amending the registered agent and/or registered offi		<u>ter the name o</u>	fthe ====================================	KD GY
new registered agent and/or the new registered office a	<u>iuaress:</u>		. 0	ATI
Name of New Registered Agent:		<del> </del>	Š	SHO
New Registered Office Address:	(Florida street address)			
	•			
	(City)	, Florida	Zip Code)	-
	(Cuy)	(4	.ip Code)	
New Registered Agent's Signature, if changing Registered	Agent:	akti a		
hereby accept the appointment as registered agent. I am fa	miliar with and accept the	obligations of	ine position.	
		<del>,</del>		
Signature of New Regis	tered Agent, if changing			

Page 1 of 4

## If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	<u>Name</u>		Address	
1) D/P/T	Brian Bozza	<u>5</u>	490 Bryson Drive, Suite 201 aples, Florida 34109	
2) <u>D/VP</u>	Marc F. Oates		515 Bryson Drive, Suite 502 laples, Florida 34109	
3) <u>D/S</u>	Clinton R. Wilson		495 Bryson Drive, Suite 421 Naples, Florida 34109	
4)				
5)				
6)				
<u>If REMOVI</u>	NG an officer and/or director, pleas	e list the title(s) and	name of the officer/director to be r	emoved:
Title(s)	<u>Name</u>	Title(s)	<u>Name</u>	
1) D/P	Jonathan A. Karalekas	4)		
2)		5)		<u> </u>
3)		6)		

E. If amending or adding additional Artic (attach additional sheets, if necessary).	les, enter change(s) here: (Be specific)		
			<u></u>
		<u> </u>	.*
W 81 18 RESERVE			
	• • • • • • • • • • • • • • • • • • • •		

Γhe	date of each amendment(s) adoption:
Effe	ctive date <u>if applicable</u> :  (no more than 90 days after amendment file date)
	(no more than 90 days after amenament fite date)
Ada	ption of Amendment(s) (CHECK ONE)
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
Z	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated
	Signature
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Brian Bozza
	(Typed or printed name of person signing)
	President / Director
	(Title of person signing)

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