NO4 00000 3924

(F	Requestor's Name)	
(<i>F</i>	Address)	
4)	Address)	
(0	City/State/Zip/Phone #)	
(E	Business Entity Name)	
([Document Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
R/A.		
- 	Office Use Only	

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08/16/22--01014--006 **35.00

SECRETARY OF STATE OF CORPORATION 2022 AUG 16 AM 8: 35 (



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: COUNTRY CLUB CONDOMINIUM III AT EAST BAY ASSOCIATION, INC. Name of Corporation

DOCUMENT NUMBER: N04000003928

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:

NICKI F. ASMER, ESQ.	
Name of Contact Person	
APPLETON REISS, PLLC	
Firm/Company	
215 N. HOWARD AVENUE, STE. 200	
Address	
TAMPA, FL 33606	
City/State and Zip Code	
nasmer@appletonreiss.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

 NICKI F. ASMER, ESQ.
 at (813)
 542-8888

 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

1. The name of the corporation: COUNTRY CLUB CONDOMINIUM III AT EAST BAY ASSOCIATION, INC.

2. The principal office address: 4174 WOODLANDS PARKWAY, PALM HARBOR, FL 34685

3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ Document nu

____ Document number: _____ N04000003928

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

MARGARET NOLAN

4174 WOODLANDS PARKWAY

PALM HARBOR, FL 34685

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

APPLETON REISS, PLLC

215 N. HOWARD AVENUE, STE. 200

P.O. Box NOT acceptable

TAMPA, FL 33606

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.

ignature of an officer or director

reasure? ?**`**`

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 ham 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 being induction of this change.

Signature of Registered Agent

8/11/2022

Date

If signing on behalf of an entity:

Nicki F. Asmer

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 (04/13)