

ND4000009360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

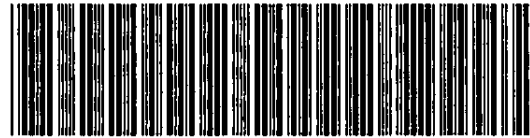
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300242309113

12/03/12--01029--020 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 DEC - 3 PM 12:29

RA ROLCH8
10 12/4/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SOMERSET LAKES-GATES LANDING ASSOCIATION INC.
Name of Corporation

DOCUMENT NUMBER: N04000009360

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:

NORBERT C RICHTER SR.

Name of Contact Person

SOMERSET LAKES-GATES LANDING

Firm/Company

11810 LAKE ALLEN DR

Address

LARGO, FL 33773

City/State and Zip Code

NORBRICH33@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NORBERT C RICHTER SR at 727 536-7255

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

**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: SOMERSET LAKES GATES LANDING ASSOCIATION INC.
2. The principal office address: 11810 LAKE ALLEN DR LARGO FL 33773

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/01/2004 Document number: N04000009360

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)

FARRELL MICHAEL S

6757 55TH STREET N

PINELLAS PARK FL 33781

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

NORBERT C RICHTER SR

11810 LAKE ALLEN DR

P.O. Box NOT acceptable

LARGO FL 33773

FILED
SECRETARY OF CORPORATIONS
12 DEC - 3 PM 12:29

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.

Norbert Richter Sr
Signature of an officer or director

NORBERT RICHTER SR (PRES DIRECTOR)

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.

Norbert Richter Sr
Signature of Registered Agent

11-28-12
Date

If signing on behalf of an entity:

NORBERT C. RICHTER SR.
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 (03/12)