

N04256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

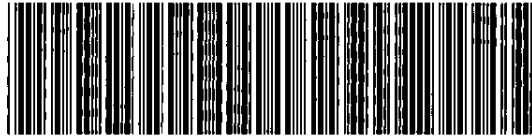
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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Tleus  
5-22-09

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Blue Crab Key Condominium Association, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** N04256

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:

Anthony D Cantabene  
(Name of Contact Person)

LJ Management Group, Inc  
(Firm/Company)

PO Box 3530  
(Address)

North Fort Myers, FL 33918  
(City/State and Zip Code)

For further information concerning this matter, please call:

Anthony D Cantabene at ( 239 ) 437-0717  
(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 15, 2009

ANTHONY D CANTABENE  
LJ MANAGEMENT GROUP, INC  
P. O. BOX 3530  
NORTH FORT MYERS, FL 33918

SUBJECT: BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: N04256

We have received your document for BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

The document must be signed by an officer/director. Please type or print their name and title.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 509A00016615

2009 MAY 21 AM 6:00  
DIVISION OF STATE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

RECEIVED

**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: Blue Crab Key Condominium Association, Inc.
2. The principal office address: P & M PROPERTY MANAGEMENT  
14360 S. TAMIAMI TRAIL UNIT B, FORT MYERS FL 33912 US
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: N04256
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)

PAUL SAPP C/O P & M PROPERTY MANAGEMENT

14360 S. TAMIAMI TRAIL UNIT B

FORT MYERS FL 33912 US

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

Anthony D Cantabene

17736 Dracena Cir

(P.O. Box NOT acceptable)

North Ft Myers, FL 33917

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09 MAY 21 AM 9:34  
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TALLAHASSEE, FLORIDA

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.

Donald Humphreys  
(Signature of an officer or director)

DONALD Humphreys  
(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.

Anthony D. Cantabene  
(Signature of Registered Agent)

5/18/09  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(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 (8/05)