

NO5000000573

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JUN -8 AM 10:00

Roberts JUN 11 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cobblestone Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N05000000573

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:

George Teague
Name of Contact Person

Professional Realty Consultants
Firm/Company

3501 Del Prado Blvd. S. #100
Address

Cape Coral FL 33904
City/State and Zip Code

GTbmc1972@msn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

George Teague at (239) 850-1098
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: Cobblestone Condominium Association, Inc.
2. The principal office address: 4400 Cortina Cr. Ft Myers FL 33916
3. The mailing address (if different): c/o Professional Realty Consultants
P.O. Box 100831 Cape Coral, FL 33910
4. Date of incorporation/qualification: 1/18/2005 Document number: N05000000573
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)

Professional Realty Consultants

2503 Del Prado Blvd. S. #500

Cape Coral FL 33904

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

Professional Realty Consultants

3501 Del Prado Blvd. S. #100

P.O. Box NOT acceptable

Cape Coral FL 33904

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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

DAVID HIRSCHFELD - President
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.


Signature of Registered Agent

6-5-09
Date

If signing on behalf of an entity:

George Teague
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