

N050000003230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

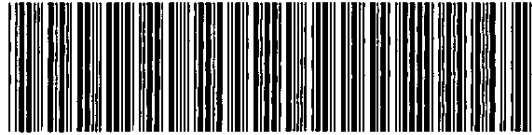
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Change

06/30/09--01019--005 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN 30 AM 8:24

FILED

ASR
7/6/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Napoli Gardens at Coral Springs Condominium Assoc
Name of Corporation

DOCUMENT NUMBER: N05000003230

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:

Barton S. Strock
Name of Contact Person

Strock & Cohen, P.A.
Firm/Company

2900 Glades Circle Ste 750
Address

Weston FL 33327
City/State and Zip Code

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

For further information concerning this matter, please call:

Barton S. Strock at (954) 659-2220
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: Napoli Gardens at Coral Springs Condominium Association
2. The principal office address: 1001 Coral Club Dr
Coral Springs FL 33071
3. The mailing address (if different): 4800 N State Road 7, Suite 105
Lauderdale Lakes FL 33071
4. Date of incorporation/qualification: 03/29/2005 Document number: N05000003230
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)

Phoenix Management

4800 N State Road 7, Suite 105

Lauderdale Lakes FL 33071

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

Strock & Cohen, P.A.

2900 Glades Circle Suite 750

P.O. Box NOT acceptable

Weston FL 33327


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

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

06/23/2009
Date

If signing on behalf of an entity:

Barton S. Strock, President

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)

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TALLAHASSEE, FLORIDA