N05000004400

(Requestor's Name)				
(Address)				
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(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

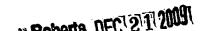


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SECRETARY OF STATE
TALLAHASSEF, FI DRIO.



COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: Terrace II at Riverwalk Condominium Association, Inc. Name of Corporation N05000004400 DOCUMENT NUMBER:_ 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: Ken Hayden Name of Contact Person Hayden & Associates Firm/Company 8359 Beacon Blvd., Suite 313 Address Fort Myers, FL 33907 City/State and Zip Code cindy@hayden-associates.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ken Hayden Area Code & Daytime Telephone Number Name of Contact Person 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

December 10, 2009

KEN HAYDEN HAYDEN & ASSOCIATES 8359 BEACON BLVD., STE 313 FORT MYERS, FL 33907

SUBJECT: TERRACE II AT RIVERWALK CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N05000004400

We have received your document for TERRACE II AT RIVERWALK CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 909A00037713

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

statement of cha	provisions of sections 607.0502, 617.0. Inge is submitted for a corporation org r to change its registered office or regi	anized under the laws of the Stat	_{te of} Florida
	he corporation: Terrace II at Riv office address: 8359 Beacon Blvd		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: April 25, 20	Document number:	N05000004400
	street address of the current registered timent of State: (If resigned, enter resigned Resigned School Har 9411 Cypress La For Hyers For Hyers	ned) E. Gelles nagement Ke Prive #2	ile with the
6. The name and (if changed):	Hayden & Associates 8359 Beacon Blvd., Suite 313	gent (if changed) and /or registere	EC 18 AM 10: 03 AHESSEE. FLORIDA ed officessee.
as changed will	ss of its registered office and the street be identical. Is authorized by resolution duly adopt the board, or the corporation has been to		
Signatur	e of an object or director	Tammy Provence	ce, President
I hereby accept I further agree t of my duties, an document is beit corporation has	the appointment as registered agent of comply with the provisions of all stand I am familiar with and accept the of the filed merely to reflect a change in been notified in writing of this change.	and agree to act in this capacity atutes relative to the proper an bligation of my position as regional the registered office address, I ge.	y. d complete performance istered agent. Or, if this hereby confirm that the
	nature of Registered Agent	November 1	8, 2009
If signing on bel	half of an entity:		
	nneth W. Hayden		

* * * FILING FEE: \$35.00 * * *

CHECKS PAYARI E TO ELORIDA DEPARTMENT OF